Department of the Treasury

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except private foundations)

Do not enter social security numbers on this form as it may be made public. ► Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Public

Inspection Internal Revenue Service For the 2017 calendar year, or tax year beginning and ending Check if applicable C Name of organization D Employer identification number Address change INSTITUTE FOR ENERGY RESEARCH Name change 76-0149778 Doing business as Initial return Number and street (or P 0, box if mail is not delivered to street address) Room/suite E Telephone number Final 900 <u> 202-621-2950</u> 975648. City or town, state or province, country, and ZIP or foreign postal code G Gross receipts \$ Amended return WASHINGTON, DC 20005 H(a) Is this a group return Applica-F Name and address of principal officer THOMAS PYLE JYes LXJNo for subordinates? pending SAME AS C ABOVE H(b) Are all subordinates included? Tax-exempt status X = 501(c)(3) 501(c) (527) ◀ (insert no.) If "No," attach a list (see instructions) J Website: ► WWW.INSTITUTEFORENERGYRESEARCH.ORG H(c) Group exemption number ▶ K Form of organization X Corporation Trust Association Other > Year of formation: 1989 M State of legal domicile; TX Part I | Summary Briefly describe the organization's mission or most significant activities SEE SCHEDULE O Activities & Governance Check this box I if the organization discontinued its operations or disposed of more than 25% of its net assets Number of voting members of the governing body (Part VI, line 1a) 6 6 Number of independent voting members of the governing body (Part VI, line 1b) 4 14 Total number of individuals employed in calendar year 2017 (Part V, line 2a) 5 6 0 Total number of volunteers (estimate if necessary) 0. 7 a Total unrelated business revenue from Part VIII, column (C), line 12 7a 0. b Net unrelated business taxable income from Form 990-T, line 34 **Prior Year Current Year** 1854663 789113. Contributions and grants (Part VIII, line 1h Revenue 121122. Program service revenue (Part VIII, line 24) 22233 2108 3415. Investment income (Part VIII, column (A), lines 10 Other revenue (Part VIII, column (A), lines 73487 61998. 11 Total revenue - add lines 8 through 11 (must equal 1952491 975648. 12 Grants and similar amounts paid (Part IX column (A), lines 1-3 0. 0. 14 Benefits paid to or for members (Part IX, colun 0 0. Salaries, other compensation, employee by 825483 631740. 12000 16a Professional fundraising fees (Part IX, column (A), line 11e) Ο. 147608. b Total fundraising expenses (Part IX, column (D), line 25) 829088 770900. 17 Other expenses (Part IX, column (A), lines 11a-11d, 11f-24e) 1666571 1402640. 18 Total expenses Add lines 13-17 (must equal Part IX, column (A), line 25) Revenue less expenses Subtract line 18 from line 12 285920. -426992. 19 Assets or Balances **Beginning of Current Year End of Year** 2186740. Total assets (Part X, line 16) 2705753 20 245428 153407. Total liabilities (Part X, line 26) 21 ₩.Ĕ 22 Net assets or fund balances Subtract line 21 from line 20 2460325. 2033333. Part II Signature Block Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Beclaration of preparer (other than officer) is based on all information of which preparer has any knowledge. Date Sign PYLE, PRESIDENT Here Type or print name and title Date Check X PTIN Print/Type preparer's name P01203311 Paid ROBERT COCCHIARO self-employed Firm's name COCCHIARO & ASSOCIATES, 20-4534812 Preparer Firm's EIN Firm's address 10800 GREENE DRIVE, Use Only Phone no. 703 - 946 - 3670 LORTON, VA 22079

May the IRS discuss this return with the preparer shown above? (see instructions)

No

Yes L

	990 (2017) INSTITUTE FOR ENERGY RESEARCH	76-0149778 Page 2
Pa	rt III Statement of Program Service Accomplishments	
	Check if Schedule O contains a response or note to any line in this Part III	X
1	Briefly describe the organization's mission	
	THE INSTITUTE FOR ENERGY RESEARCH (IER) IS A NOT-FOR-PR	
	ORGANIZATION THAT CONDUCTS INTENSIVE RESEARCH AND ANALY	SIS ON THE
2	Did the organization undertake any significant program services during the year which were not listed on the	
	prior Form 990 or 990-EZ?	Yes X No
	If "Yes," describe these new services on Schedule O	
3	Did the organization cease conducting, or make significant changes in how it conducts, any program services?	Yes X No
	If "Yes," describe these changes on Schedule O	
4	Describe the organization's program service accomplishments for each of its three largest program services, as	
	Section 501(c)(3) and 501(c)(4) organizations are required to report the amount of grants and allocations to other	ers, the total expenses, and
	revenue, if any, for each program service reported	
4a	(Code) (Expenses \$655203. including grants of \$) (Reven	
	PUBLIC EDUCATION: IER TURNS RESEARCH INTO EDUCATIONAL	
	IER'S COMMUNICATION AND EDUCATION EFFORTS ARE DISSEMINA	
	BOTH TRADITIONAL AND NEW MEDIA TO EDUCATE POLICY MAKERS	
	GENERAL PUBLIC, AND OTHER CONSTITUENCIES ON ENERGY ISSU	ES AND SOUND
	ENERGY AND ENVIRONMENTAL POLICY.	
	· · · · · · · · · · · · · · · · · · ·	
		· -
4b	(Code) (Expenses \$ 456497. including grants of \$) (Reven	ue \$ 120930.)
	RESEARCH: IER CONDUCTS INTENSIVE, ORIGINAL RESEARCH AND	ANALYSIS ON THE
	FUNCTIONS, OPERATIONS, AND GOVERNMENT REGULATION OF GLO	BAL ENERGY
	MARKETS. IER HAS EARNED A SOLID REPUTATION AS A PREMIE	R SOURCE OF
	ACCURATE, SUBSTANTIVE AND TIMELY ENERGY INFORMATION FOR	
	THE MEDIA, AND PUBLIC. IER'S SCHOLARLY RESEARCH PROVID	
	INTELLECTUAL UNDERPINNINGS FOR OUR EDUCATIONAL EFFORTS.	THIS YEAR WE
	FOCUSED ON THE IMPEDIMENTS TO DOMESTIC ENERGY PRODUCTION	
	GOVERNMENT RESTRICTIONS ON ACCESS, BURDENSOME REGULATION	
	FAVORITISM OF ENERGY SOURCES THAT ARE UNSUSTAINABLE IN	THE MARKETPLACE.
4c	(Code) (Expenses \$) (Reven	
70	(Code) (Expenses \$ including grants of \$) (Neven	ue \$ /
		
4d	Other program services (Describe in Schedule O)	
	4444 500	
4e	Total program service expenses 1111700.	

			Yes	No
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)?			
	If "Yes," complete Schedule A	1_	X	
2	is the organization required to complete Schedule B, Schedule of Contributors?	2_	X	
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for			
	public office? If "Yes," complete Schedule C, Part I	3_		<u> </u>
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities, or have a section 501(h) election in effect			
	during the tax year? If "Yes," complete Schedule C, Part II	4	X	
5	Is the organization a section 501(c)(4), 501(c)(5), or 501(c)(6) organization that receives membership dues, assessments, or			
	similar amounts as defined in Revenue Procedure 98-19? If "Yes," complete Schedule C, Part III	5		X
6	Did the organization maintain any donor advised funds or any similar funds or accounts for which donors have the right to			
	provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I	_6		X
7	Did the organization receive or hold a conservation easement, including easements to preserve open space,			
	the environment, historic land areas, or historic structures? If "Yes," complete Schedule D, Part II	7		_X_
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete			
	Schedule D, Part III	8		_X_
9	Did the organization report an amount in Part X, line 21, for escrow or custodial account liability, serve as a custodian for			
	amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services?			
	If "Yes," complete Schedule D, Part IV	9		_X_
10	Did the organization, directly or through a related organization, hold assets in temporarily restricted endowments, permanent			
	endowments, or quasi-endowments? If "Yes," complete Schedule D, Part V	10		<u> X</u>
11	If the organization's answer to any of the following questions is "Yes," then complete Schedule D, Parts VI, VIII, IX, or X			
	as applicable			
а	Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D,			
	Part VI	11a	X	
b	Did the organization report an amount for investments - other securities in Part X, line 12 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII	11b		X
С	Did the organization report an amount for investments - program related in Part X, line 13 that is 5% or more of its total			
	assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII	11c		X
d	Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in			
	Part X, line 16? If "Yes," complete Schedule D, Part IX	11d		X
е	Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X	11e	X	
f	•			
	the organization's liability for uncertain tax positions under FIN 48 (ASC 740)? If "Yes," complete Schedule D, Part X	11f	X	
12a	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete			
	Schedule D, Parts XI and XII	12a		_X_
b	Was the organization included in consolidated, independent audited financial statements for the tax year?			
	If "Yes," and if the organization answered "No" to line 12a, then completing Schedule D, Parts XI and XII is optional	12b	X	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		X
	Did the organization maintain an office, employees, or agents outside of the United States?	14a		X
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business,			
	investment, and program service activities outside the United States, or aggregate foreign investments valued at \$100,000			37
	or more? If "Yes," complete Schedule F, Parts I and IV	14b		<u> </u>
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or other assistance to or for any			37
	foreign organization? If "Yes," complete Schedule F, Parts II and IV	15	-	<u> </u>
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or other assistance to	40		v
	or for foreign individuals? If "Yes," complete Schedule F, Parts III and IV	16		<u>X</u>
17	Did the organization report a total of more than \$15,000 of expenses for professional fundraising services on Part IX,			37
	column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		<u> X</u>
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines	۔ د		v
	1c and 8a? If "Yes," complete Schedule G, Part II	_ 18		<u>X</u>
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes,"			37
	complete Schedule G, Part III	19	990 (X
		Form		ルコフリ

			103	110
20a	Did the organization operate one or more hospital facilities? If "Yes," complete Schedule H	20a		Х
b	If "Yes" to line 20a, did the organization attach a copy of its audited financial statements to this return?	20b		
21	Did the organization report more than \$5,000 of grants or other assistance to any domestic organization or			
	domestic government on Part IX, column (A), line 1? If "Yes," complete Schedule I, Parts I and II	21		X
22	Did the organization report more than \$5,000 of grants or other assistance to or for domestic individuals on			
	Part IX, column (A), line 2? If "Yes," complete Schedule I, Parts I and III	22		X
23	Did the organization answer "Yes" to Part VII, Section A, line 3, 4, or 5 about compensation of the organization's current			
	and former officers, directors, trustees, key employees, and highest compensated employees? If "Yes," complete	1		
	Schedule J	23	X	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the			
	last day of the year, that was issued after December 31, 2002? If "Yes," answer lines 24b through 24d and complete] ,		
	Schedule K If "No", go to line 25a	24a		<u>X</u>
	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		
С	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease			
	any tax-exempt bonds?	24c		<u> </u>
	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		
25a	Section 501(c)(3), 501(c)(4), and 501(c)(29) organizations. Did the organization engage in an excess benefit			
	transaction with a disqualified person during the year? If "Yes," complete Schedule L, Part I	25a		X
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and	:		
	that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? If "Yes," complete			۱
	Schedule L, Part I	25b		X
26	Did the organization report any amount on Part X, line 5, 6, or 22 for receivables from or payables to any current or		']
	former officers, directors, trustees, key employees, highest compensated employees, or disqualified persons? If "Yes,"			
~=	complete Schedule L, Part II	_26_		<u> </u>
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial			
	contributor or employee thereof, a grant selection committee member, or to a 35% controlled entity or family member			•
28	of any of these persons? If "Yes," complete Schedule L, Part III	27		X
20	Was the organization a party to a business transaction with one of the following parties (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
а	A current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28a	-	<u>x</u>
	A family member of a current or former officer, director, trustee, or key employee? If "Yes," complete Schedule L, Part IV	28b		X
	An entity of which a current or former officer, director, trustee, or key employee (or a family member thereof) was an officer,	200		1
Ŭ	director, trustee, or direct or indirect owner? If "Yes," complete Schedule L, Part IV	28c		x
29	Did the organization receive more than \$25,000 in non-cash contributions? If "Yes," complete Schedule M	29	Х	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation			
	contributions? If "Yes," complete Schedule M	30		_X_
31	Did the organization liquidate, terminate, or dissolve and cease operations?			
	If "Yes," complete Schedule N, Part I	31		<u>x</u> _
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? If "Yes," complete			
	Schedule N, Part II	32		Х
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations			
	sections 301 7701-2 and 301 7701-3? If "Yes," complete Schedule R, Part I	33		X
34	Was the organization related to any tax-exempt or taxable entity? If "Yes," complete Schedule R, Part II, III, or IV, and			
	Part V, line 1	34	X	
35a	Did the organization have a controlled entity within the meaning of section 512(b)(13)?	35a	X	
b	If "Yes" to line 35a, did the organization receive any payment from or engage in any transaction with a controlled entity			
	within the meaning of section 512(b)(13)? If "Yes," complete Schedule R, Part V, line 2	35b_	X	
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization?			
	If "Yes," complete Schedule R, Part V, line 2	36	X	
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization			
	and that is treated as a partnership for federal income tax purposes? If "Yes," complete Schedule R, Part VI	37		<u>X</u>
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11b and 19?			
	Note. All Form 990 filers are required to complete Schedule O	38	X	
		Form	990 ((2017)

	Check if Schedule O contains a response or note to any line in this Part V						
			Yes	No			
1a	Enter the number reported in Box 3 of Form 1096 Enter -0- if not applicable	<u>.</u>					
b	Enter the number of Forms W-2G included in line 1a Enter -0 if not applicable						
С	Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming]					
	(gambling) winnings to prize winners?	1c					
2a	Enter the number of employees reported on Form W-3, Transmittal of Wage and Tax Statements,						
	filed for the calendar year ending with or within the year covered by this return 2a 1						
b	If at least one is reported on line 2a, did the organization file all required federal employment tax returns?	2b	X				
	Note. If the sum of lines 1a and 2a is greater than 250, you may be required to e-file (see instructions)						
За	Did the organization have unrelated business gross income of \$1,000 or more during the year?	3a		X			
b	If "Yes," has it filed a Form 990 T for this year? If "No," to line 3b, provide an explanation in Schedule O	3b					
4a	At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a						
	financial account in a foreign country (such as a bank account, securities account, or other financial account)?	4a		X			
b	If "Yes," enter the name of the foreign country						
	See instructions for filing requirements for FinCEN Form 114, Report of Foreign Bank and Financial Accounts (FBAR)						
5a	Was the organization a party to a prohibited tax shelter transaction at any time during the tax year?	5a		X			
b	Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?	5b_		X			
С	If "Yes," to line 5a or 5b, did the organization file Form 8886-T?	5c_					
6a	Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit						
	any contributions that were not tax deductible as charitable contributions?	6a		_X_			
b	If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts						
	were not tax deductible?	6b_					
7	Organizations that may receive deductible contributions under section 170(c).			_			
а	Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?	7a		<u>X</u>			
b If "Yes," did the organization notify the donor of the value of the goods or services provided?							
С	Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required						
	to file Form 8282?	7c		<u> </u>			
d	If "Yes," indicate the number of Forms 8282 filed during the year			٠.			
е	Did the organization receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?	7e		<u> </u>			
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract?							
g	If the organization received a contribution of qualified intellectual property, did the organization file Form 8899 as required?	7g					
h	If the organization received a contribution of cars, boats, airplanes, or other vehicles, did the organization file a Form 1098-C?	7h					
8	Sponsoring organizations maintaining donor advised funds. Did a donor advised fund maintained by the			-			
	sponsoring organization have excess business holdings at any time during the year?	8		——			
9	Sponsoring organizations maintaining donor advised funds.		-				
a	Did the sponsoring organization make any taxable distributions under section 4966?	9a					
	Did the sponsoring organization make a distribution to a donor, donor advisor, or related person?	9b					
10	Section 501(c)(7) organizations. Enter						
a	Initiation fees and capital contributions included on Part VIII, line 12 Cross research park dead on Form 200, Part VIII, less 12, for public uses of old feedback.	1					
	Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities [10b]	1					
11	Section 501(c)(12) organizations. Enter Gross income from members or shareholders			,			
a	Gross income from other sources (Do not net amounts due or paid to other sources against	1					
U	amounts due or received from them)			'			
122	Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?	12a					
	If "Yes," enter the amount of tax-exempt interest received or accrued during the year	120					
13	Section 501(c)(29) qualified nonprofit health insurance issuers.	1 1		_			
	Is the organization licensed to issue qualified health plans in more than one state?	13a		<u>_</u>			
a	Note. See the instructions for additional information the organization must report on Schedule O						
h	Enter the amount of reserves the organization is required to maintain by the states in which the]_	,	•			
	organization is licensed to issue qualified health plans						
c	Enter the amount of reserves on hand	,					
	Did the organization receive any payments for indoor tanning services during the tax year?	14a		X			
	If "Yes," has it filed a Form 720 to report these payments? If "No," provide an explanation in Schedule O	14b					
	and the second s		990	(2017)			

Form 990 (2017) INSTITUTE FOR ENERGY RESEARCH 76-0149778 Page
Part'VI Governance, Management, and Disclosure For each "Yes" response to lines 2 through 7b below, and for a "No" response to line 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

	Check if Schedule O contains a response or note to any line in this Part VI			\mathbf{x}		
Sec	tion A. Governing Body and Management					
			Yes	No		
1a	Enter the number of voting members of the governing body at the end of the tax year 1a 5					
	If there are material differences in voting rights among members of the governing body, or if the governing					
	body delegated broad authority to an executive committee or similar committee, explain in Schedule 0.					
b	Enter the number of voting members included in line 1a, above, who are independent 1b 6					
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other					
	officer, director, trustee, or key employee?	2		Х		
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision					
	of officers, directors, or trustees, or key employees to a management company or other person?	3		X		
4	Did the organization make any significant changes to its governing documents since the prior Form 990 was filed?	4		Х		
5	Did the organization become aware during the year of a significant diversion of the organization's assets?	5		X		
6	Did the organization have members or stockholders?	6	į	X		
7a	Did the organization have members, stockholders, or other persons who had the power to elect or appoint one or					
	more members of the governing body?	7a		X		
þ	Are any governance decisions of the organization reserved to (or subject to approval by) members, stockholders, or					
	persons other than the governing body?	7b		_X_		
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following:	_		_,		
а	The governing body?	8a	X			
b	Each committee with authority to act on behalf of the governing body?	8b	Х			
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the					
	organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9		X		
Sec	tion B. Policies (This Section B requests information about policies not required by the Internal Revenue Code)					
			Yes	No		
10a	Did the organization have local chapters, branches, or affiliates?	10a		<u> X</u>		
b	If "Yes," did the organization have written policies and procedures governing the activities of such chapters, affiliates,					
	and branches to ensure their operations are consistent with the organization's exempt purposes?	10b				
	Has the organization provided a complete copy of this Form 990 to all members of its governing body before filing the form?	11a	Х			
b	Describe in Schedule O the process, if any, used by the organization to review this Form 990	-	x			
12a Did the organization have a written conflict of interest policy? If "No," go to line 13						
þ	Were officers, directors, or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	X			
С	Did the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe					
	in Schedule O how this was done	12c	X			
13	Did the organization have a written whistleblower policy?	13	X			
14	Did the organization have a written document retention and destruction policy?	14	Х			
15	Did the process for determining compensation of the following persons include a review and approval by independent			•		
	persons, comparability data, and contemporaneous substantiation of the deliberation and decision?		٠,	-		
	The organization's CEO, Executive Director, or top management official	15a	X			
b	Other officers or key employees of the organization	15b	_X_	 		
	If "Yes" to line 15a or 15b, describe the process in Schedule O (see instructions)			•		
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a			• '		
	taxable entity during the year?	16a		<u> X</u>		
b	If "Yes," did the organization follow a written policy or procedure requiring the organization to evaluate its participation			'		
	in joint venture arrangements under applicable federal tax law, and take steps to safeguard the organization's	104	-			
500	exempt status with respect to such arrangements?	16b				
	tion C. Disclosure List the states with which a copy of this Form 990 is required to be filed ►AL, AK, AR, CO, CT, FL, GA, HI, IL	K C	ĸv	ME		
17				, ME		
18	Section 6104 requires an organization to make its Forms 1023 (or 1024 if applicable), 990, and 990-T (Section 501(c)(3)s only) a	vanab	10			
	for public inspection Indicate how you made these available Check all that apply Own website Another's website X Upon request Other (explain in Schedule O)					
40	Describe in Schedule O whether (and if so, how) the organization made its governing documents, conflict of interest policy, and	finan	rial			
19		midil	Jial .			
20	statements available to the public during the tax year State the name, address, and telephone number of the person who possesses the organization's books and records					
20	THE ORGANIZATION - 202-621-2950					
	1155 15TH STREET, NW, NO. 900, WASHINGTON, DC 20005					
73200	SEE SCHEDULE O FOR FULL LIST OF STATES	Form	990	(2017)		

Part VII Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

Check if Schedule O contains a response or note to any line in this Part VII

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

- 1a Complete this table for all persons required to be listed Report compensation for the calendar year ending with or within the organization's tax year
- List all of the organization's current officers, directors, trustees (whether individuals or organizations), regardless of amount of compensation Enter 0 in columns (D), (E), and (F) if no compensation was paid
 - List all of the organization's current key employees, if any See instructions for definition of "key employee"
- List the organization's five current highest compensated employees (other than an officer, director, trustee, or key employee) who received reportable compensation (Box 5 of Form W-2 and/or Box 7 of Form 1099-MISC) of more than \$100,000 from the organization and any related organizations.
- List all of the organization's former officers, key employees, and highest compensated employees who received more than \$100,000 of reportable compensation from the organization and any related organizations
- List all of the organization's former directors or trustees that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

List persons in the following order individual trustees or directors, institutional trustees, officers, key employees, highest compensated employees, and former such persons

(A)	(B)	(C)		(D)	(E)	(F)					
Name and Title	Average	(do		Posi		than o	ne	Reportable	Reportable	Estimated amount of other	
	hours per	box	, unle:	ss pe	rson	s boti	n an	compensation	compensation		
	week	-		-	10000	171103		from	from related		
	(list any hours for	Jirect						the organization	organizations	compensation from the	
	related) o a c	stee			nsate		(W-2/1099-MISC)	(W-2/1099-MISC)	organization	
	organizations	ons ‡	Institutional trustee		Key employee	Highest compensated employee		(**************************************		and related	
	below	ndual	tuton	.er)dwa	loyee	ner			organizations	
	line)	ıpu	Insti	Officer	Ke.	돌	Рог тег				
(1) JIM CLARKSON	1.00										
DIRECTOR	1.00	X						0.	0.	0	
(2) STEVEN HAYWARD	1.00										
DIRECTOR		X						0.	0.	0	
(3) TRENT SEBITS	1.00										
DIRECTOR		X						0.	0.	0	
(4) PRESTON MARSHALL	1.00								_	_	
CHAIRMAN		Х						0.	0.	0	
(5) WAYNE GABLE	1.00								•		
DIRECTOR		X					-	0.	0.	0	
(6) RICHARD STROUP	1.00								•		
DIRECTOR	16.00	X				_		0.	0.	0	
(7) THOMAS PYLE	16.00	} '						105000	015710	05101	
PRESIDENT	34.00	├		X	_			105288.	215712.	25101	
(8) ROBERT BRADLEY	45.00	!		٠,				100704	14205	12062	
CHIEF EXECUTIVE OFFICER	5.00			X				122704.	14395.	12863	
(9) LISA WALLACE	23.00			х				98550.	_120450.	18720	
SEC/TREASURER/SVP DEVELOP.	27.00			Λ		-				10/20	
		1									
						Н		<u> </u>		<u></u>	
											
		-			_				. ——	<u> </u>	
		}									
				-					-		
						\vdash					
		1									
		\vdash			\vdash	\vdash	_				
		1									
							_				
		[
		\vdash			\vdash		_	-			
		1		Ì	l						

Form **990** (2017)

Part	VII Section A. Officers, Dire	ectors, Trust	tees, Key Em	ploy	ees/	, and	d Hı	ghe	st C	Compensated Employe	es (continued)				
	(A)		(B)			((C)			(D)	(E)	(F)			
	Name and title		Average	(do	not c	Pos			оле	Reportable	Reportable				ed
			hours per	box	, unle cer ar	ss pe	erson	is bot	h an	1	compensation	- 1		ount	of
			week (list any	<u> </u>	CGI Z		T	171103	1	7 ""	from related			other	
			hours for	liect				_		the organization	organizations (W-2/1099-MIS			pensa om the	
			related	50 80	stee			rsate		(W-2/1099-MISC)	(44.2/1099-14113	~		anızatı	
			organizations	Individual trustee or director	Institutional trustee		ag.	Highest compensated employee	l	(** 2, *********************************			•	d relate	
		ĺ	below	lgng	員	 =	Key employee	est	늘		ĺ		orga	ınızatı	ons
			line)	É	Insti	Officer	Key	돌	Former						
				1								Ì			
									<u> </u>						
				[ĺ		ĺ		ĺ						
	<u> </u>			<u>L</u> .											
				1		ĺ	1								
	 						<u> </u>	<u> </u>							
		[ĺ	ĺ						
							ļ	ļ			· 	\rightarrow			
												1			
					<u> </u>		_	ــ							
				1			(ĺ							
						_		-				\rightarrow			
		}		1											
				-				\vdash		 	<u> </u>				
		ŀ		-				ĺ	ĺ						
				-						<u> </u>					
		}		}											
45.	D to 4-4-1					<u> </u>		<u> </u>		326542.	35055	=		566	0 1
	Sub-total	4- 4- Dawi Mi	. C4 A							0.	33033	0.		000	04.
	Total from continuation shee	ts to Part VII	i, Section A							326542.	35055			566	
	Fotal (add lines 1b and 1c) Fotal number of individuals (inc	duding but o	at limited to th		licto	d al	hove		20.5					<u>, 0 0 c</u>	<u>54.</u>
	compensation from the organiz		ot inflited to ti	1056	11516	u ai	DOVE	3) WI	10 1	eceived more than \$100	,000 of reportable	3			2
	compensation from the organiz	ation					_		-					Yes	No
3 [Old the organization list any for	rmer officer	director or tri	ister	e ke	v er	nolo	vee	or	highest compensated e	mplovee on	Γ	\neg		
	ine 1a? If "Yes," complete Sch				0, 110	,		,,,,	,	mgmoot companicated c	p.oyoo on		3	-	Х
	For any individual listed on line				omo	ensa	ation	n and	to b	her compensation from	the organization			$\neg \neg$	
	and related organizations great		· ·		-					·	and organization		4	x	
	Did any person listed on line 1a										idual for services				
	endered to the organization?												5	-	X
	on B. Independent Contracto														
1 (Complete this table for your fiv	e highest cor	npensated in	depe	ende	nt c	ontr	racto	ors t	that received more than	\$100,000 of com	pensa	tion fr	om	
	he organization Report comp	-	•												
	· · · · · · · · · · · · · · · · · · ·	(A)								(B)			(C		
	Name a	nd business	address _							Description of s	ervices	Co	mper	sation	n _
NJI	MEDIA, 101 1/2	SOUTH	UNION	STI	REI	ET,	,		ĺ	NEW MEDIA SE	RVICES				
ALE	XANDRIA, VA 223	14							ļ	AND CONSULTI	NG		10	097	04.
			<u></u> ,			_									
									ĺ		[
											İ				
									_						
			i						ĺ		[
	Fotal number of independent o	•		ot li	mite	d to	tho	se lis	stec	d above) who received n	nore than				
9	\$100,000 of compensation from	m the organiz	ation >					<u>L</u>							
												F	·orm §	990 (2	2017)

		Check if Schedule O cont	ains a response	or note to any line	e in this Part VIII			
			•		(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	Revenue excluded from tax under sections 512 - 514
ts ts		Federated campaigns	1a				·	0.2 0,1
E I		Membership dues	1b					
اع ق		Fundraising events	10					
a it		Related organizations	1d					
S,E		Government grants (contribut		,				
ē	f	All other contributions, gifts, gran						
E E	·	similar amounts not included abo		789113.				
E 6	a	Noncash contributions included in lines		152723.				
Contributions, Gifts, Grants and Other Similar Amounts	_	Total. Add lines 1a-1f		>	789113.			
				Business Code				
e	2 a	CONTRACT REVENU	JE	900099	120930.	120930.		
اه ڲٙ	b	PUBLICATIONS		451211	192.	192.		
Program Service Revenue	С							
eve	d							
ρ. H	е							
ا ته	f	All other program service reve	enue					
		Total. Add lines 2a-2f		<u> </u>	121122.			
ŀ	3	Investment income (including	dividends, intere	est, and				
ĺ		other similar amounts)		▶	3415.			3415.
	4	Income from investment of ta	x-exempt bond p	oroceeds 🕨				
ŀ	5	Royalties		>			<u></u> -	<u> </u>
			(i) Real	(II) Personal				
	6 a	Gross rents						
	b	Less rental expenses						
	С	Rental income or (loss)	L					
	d	` '		_				
	7 a	Gross amount from sales of	(i) Securities	(II) Other				
1		assets other than inventory						
	b	Less cost or other basis						
		and sales expenses						
		Gain or (loss)	L	<u> </u>				
İ		Net gain or (loss)						
ne l	& a	Gross income from fundraisin		1				
ě.		contributions reported on line	of	1		Ì		
Other Reven		Part IV, line 18	•					
her	h	Less direct expenses	a b					
ŏ		Net income or (loss) from fund	-	•				
]		Gross income from gaming ac	=			-		
	~ -	Part IV, line 19	а	1				
	b	Less direct expenses	b					
ļ		Net income or (loss) from gam	ning activities	•				
l		Gross sales of inventory, less	_					
ł		and allowances	а	<u> </u>		}		
	b	Less cost of goods sold	b					
Į		Net income or (loss) from sale	s of inventory					
Ĺ		Miscellaneous Revenu	ie	Business Code				_
	11 a	EXPENSE REIMBUF	RSEMENT	900099	59620.			59620.
- [b	OTHER		900099	1378.			1378.
1	С	HONORARIA		812900	1000.	1000.		
	d	All other revenue						
	е	Total. Add lines 11a-11d		▶]	61998.			
	12	Total revenue See instructions.		<u> </u>	975648.	122122.	0	. 64413.

Form 990 (2017) INSTITUTE FOR ENERGY RESEARCH Part'IX Statement of Functional Expenses

	Check if Schedule O contains a respons		this Part IX	<u> </u>	X
	not include amounts reported on lines 6b, 8b, 9b, and 10b of Part VIII.	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to domestic organizations				
	and domestic governments. See Part IV, line 21				
2	Grants and other assistance to domestic				
	individuals See Part IV, line 22				
3	Grants and other assistance to foreign				
	organizations, foreign governments, and foreign			.	
	individuals See Part IV, lines 15 and 16				 -
4	Benefits paid to or for members				
5	Compensation of current officers, directors,	354712.	298214.	18389.	20100
	trustees, and key employees	354/12.	290214.	10309.	38109
6	Compensation not included above, to disqualified				
	persons (as defined under section 4958(f)(1)) and				
7	persons described in section 4958(c)(3)(B) Other salaries and wages	214473.	137769.	55777.	20927
7 8	Pension plan accruals and contributions (include	2144/3.	131103.	23111.	
0	section 401(k) and 403(b) employer contributions)	12589.	6857.	4559.	1173
9	Other employee benefits	16316.	11510.	3436.	1370
10	Payroll taxes	33650.	26063.	4365.	3222
11	Fees for services (non-employees)	33030.	20003.	2303.	
'' a	Management				
b	Legal	5957.		5957.	
c	Accounting	48441.		48441.	<u></u>
d	Lobbying			40111	
e	Professional fundraising services See Part IV, line 17				
f	Investment management fees		<u> </u>		
g	Other (If line 11g amount exceeds 10% of line 25,				
3	column (A) amount, list line 11g expenses on Sch 0)	334387.	316852.		17535
12	Advertising and promotion				
13	Office expenses	49437.	20999.	9388.	19050
14	Information technology	933.		933.	
15	Royalties				
16	Occupancy	102979.	79566.	13472.	9941
17	Travel	51519.	45063.	6456.	
18	Payments of travel or entertainment expenses				
	for any federal, state, or local public officials		<u> </u>		
19	Conferences, conventions, and meetings				<u> </u>
20	Interest				
21	Payments to affiliates				
22	Depreciation, depletion, and amortization	123460.		123460.	
23	Insurance	28438.		28438.	
24	Other expenses Itemize expenses not covered above (List miscellaneous expenses in line 24e. If line 24e amount exceeds 10% of line 25, column (A) amount, list line 24e expenses on Schedule 0.)				
а	LICENSE AND REGISTRATIO	10679.	0.	438.	10241
b	G&A ALLOCATION	0.	168356.	-190068.	21712
С					
d					
	All other expenses	14670.	451.	9891.	4328
25	Total functional expenses Add lines 1 through 24e	1402640.	1111700.	143332.	147608
26	Joint costs Complete this line only if the organization				
	reported in column (B) joint costs from a combined				
	educational campaign and fundraising solicitation.				
	Check here If following SOP 98-2 (ASC 958-720)				

Part X	Balance Sheet			
	Check if Schedule O contains a response or note to any line in this Part X			
		(A) Beginning of year		(B) End of year
1	Cash - non-interest-bearing	68921.	1	50199
2	Savings and temporary cash investments	2067569.	2	1659938
3	Pledges and grants receivable, net		3	4120
4	Accounts receivable, net	247562.	4	278603
5	Loans and other receivables from current and former officers, directors,			
	trustees, key employees, and highest compensated employees. Complete			
	Part II of Schedule L		5	
6	Loans and other receivables from other disqualified persons (as defined under			
- }	section 4958(f)(1)), persons described in section 4958(c)(3)(B), and contributing			
	employers and sponsoring organizations of section 501(c)(9) voluntary	-		
ខ្ម	employees' beneficiary organizations (see instr). Complete Part II of Sch L		6	
Assets	Notes and loans receivable, net		7	
₹ 8	Inventories for sale or use	3101.	8	3101
9	Prepaid expenses and deferred charges	39858.	9	16813
10:	a Land, buildings, and equipment cost or other			
	basis Complete Part VI of Schedule D 10a 693984.			
1	b Less accumulated depreciation 10b 562023.	236737.	10c	131961
11	Investments · publicly traded securities	<u></u>	11	
12	Investments - other securities See Part IV, line 11		12	
13	Investments - program-related See Part IV, line 11		13	
14	Intangible assets		14	
15	Other assets See Part IV, line 11	42005.	15	42005
16	Total assets. Add lines 1 through 15 (must equal line 34)	2705753.	16	2186740
17	Accounts payable and accrued expenses	63878.	17	60580
18	Grants payable	<u></u>	18	
19	Deferred revenue	· - ·	19	
20	Tax-exempt bond liabilities		20	
21	Escrow or custodial account liability Complete Part IV of Schedule D		21	
<u>s</u> 22	Loans and other payables to current and former officers, directors, trustees,			
	key employees, highest compensated employees, and disqualified persons			•
Liabilities 23	Complete Part II of Schedule L		22	
23	Secured mortgages and notes payable to unrelated third parties		23	
24	Unsecured notes and loans payable to unrelated third parties		24	
25	Other liabilities (including federal income tax, payables to related third]]	
	parties, and other liabilities not included on lines 17-24) Complete Part X of	101550		02027
	Schedule D	181550. 245428.	25	92827 153407
26	Total liabilities. Add lines 17 through 25	243420.	26	153407
	Organizations that follow SFAS 117 (ASC 958), check here ► X and			
ő	complete lines 27 through 29, and lines 33 and 34.	2377825.		2033333
	Unrestricted net assets	82500.	27	2033333
28	Temporarily restricted net assets	62300.	28	
29	Permanently restricted net assets		29	· ···· ·
[]	Organizations that do not follow SFAS 117 (ASC 958), check here		1 1	
2 20	and complete lines 30 through 34.		20	• • • •
30	Capital stock or trust principal, or current funds	<u> </u>	30	
31	Paid-in or capital surplus, or land, building, or equipment fund		31	
Net Assets or Fund Balances	Retained earnings, endowment, accumulated income, or other funds	2/50225	32	202222
33	Total net assets or fund balances	2460325.	33	2033333. 2186740.
34	Total liabilities and net assets/fund balances	2705753.	34	2186/4 5 990/3

Form 990 (2017)

Form	1990 (2017) INSTITUTE FOR ENERGY RESEARCH	76-014	9778	Pag	ge 12			
Pa	rt'XI Reconciliation of Net Assets							
	Check if Schedule O contains a response or note to any line in this Part XI							
1	Total revenue (must equal Part VIII, column (A), line 12)	1			<u>48.</u>			
2	Total expenses (must equal Part IX, column (A), line 25)	2			$\frac{40.}{92.}$			
3	Revenue less expenses Subtract line 2 from line 1							
4	Net assets or fund balances at beginning of year (must equal Part X, line 33, column (A))	4	24	<u> 603</u>	<u> 25.</u>			
5	Net unrealized gains (losses) on investments	5						
6	Donated services and use of facilities	6						
7	Investment expenses	7						
8	Prior period adjustments	8						
9	Other changes in net assets or fund balances (explain in Schedule O)	9			0.			
10	Net assets or fund balances at end of year Combine lines 3 through 9 (must equal Part X, line 33,							
	column (B))	10	20	333	33.			
Pa	rt XII Financial Statements and Reporting							
	Check if Schedule O contains a response or note to any line in this Part XII				X			
				Yes	No			
1	Accounting method used to prepare the Form 990 Cash X Accrual Other							
	If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedu	ıle O.						
2a	Were the organization's financial statements compiled or reviewed by an independent accountant?		2a		_X_			
	If "Yes," check a box below to indicate whether the financial statements for the year were compiled or review	ed on a						
	separate basis, consolidated basis, or both							
	Separate basis Consolidated basis Both consolidated and separate basis							
b	Were the organization's financial statements audited by an independent accountant?		2b	X				
	If "Yes," check a box below to indicate whether the financial statements for the year were audited on a separate	ate basis,	1 1					
	consolidated basis, or both							
	Separate basis X Consolidated basis Both consolidated and separate basis							
С	If "Yes" to line 2a or 2b, does the organization have a committee that assumes responsibility for oversight of	the audit,						
	review, or compilation of its financial statements and selection of an independent accountant?		2c	X				
	If the organization changed either its oversight process or selection process during the tax year, explain in Se	chedule O	1 7		_			
За	As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the	Single Audit						
	Act and OMB Circular A-133?		За		_X_			
b	If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the re-	quired audit						
or audits, explain why in Schedule O and describe any steps taken to undergo such audits								

Form **990** (2017)

SCHEDULE A

(Form 990 or 990-EZ)

Department of the Treasury

Internal Revenue Service

Public Charity Status and Public Support
Complete if the organization is a section 501(c)(3) organization or a section
4947(a)(1) nonexempt charitable trust.

Attach to Form 990 or Form 990-EZ.

OMB No 1545-0047

Open to Public Inspection

Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

Employer identification number

		TNCT	בסם שייווייד	ENERGY RESEA	BCH			7	6-0149778		
Pa	rt I	Reason for Public (Charity Status (All organizations must co	omplete th	ıs part) Se	ee instructions		0_0145770		
		zation is not a private found				_			0/1		
1		A church, convention of ch									
2		A school described in secti					7,6 4,67		() /		
3	$\overline{\Box}$	A hospital or a cooperative		•			ii).				
4	Ħ	A medical research organiz					•	(iii). Enter	the hospital/s name.		
·		city, and state		, ,				(,.			
5		An organization operated for	or the benefit of a co	llege or university owner	d or operat	ted by a g	overnmental L	ınıt describ	ped in		
•		section 170(b)(1)(A)(iv). (C			 	, - 3					
6		A federal, state, or local government or governmental unit described in section 170(b)(1)(A)(v).									
	$\overline{\mathbf{x}}$	An organization that norma	•				• •	ne general	public described in		
-		section 170(b)(1)(A)(vi). (Co		a. part or tappe	3			9			
8		A community trust describe		(1)(A)(vi), (Complete Par	t II)						
9		An agricultural research org	• •			ed in coniu	inction with a	land-grant	college		
	_	or university or a non-land-g			•	-		_	•		
		university	, ,	,			•	J			
10		An organization that norma	lly receives (1) more	than 33 1/3% of its sur	port from	contribution	ons, members	hip fees, a	nd gross receipts from		
		activities related to its exem							-		
		income and unrelated busin	ness taxable income	(less section 511 tax) fr	om busine	sses acqu	ired by the or	ganization	after June 30, 1975		
		See section 509(a)(2). (Cor	mplete Part III)					_			
11		An organization organized a	and operated exclus	ively to test for public sa	fety Sees	section 50)9(a)(4).				
12		An organization organized a	and operated exclus	ively for the benefit of, to	o perform t	the functio	ons of, or to ca	irry out the	purposes of one or		
		more publicly supported or	ganizations describe	ed in section 509(a)(1) o	r section !	509(a)(2)	See section 5	i09(a)(3). C	Check the box in		
		lines 12a through 12d that	describes the type o	f supporting organization	n and com	plete lines	s 12e, 12f, and	i 12g			
а		Type I. A supporting orga	anization operated, s	upervised, or controlled	by its sup	ported org	janization(s), t	ypically by	giving		
		the supported organization	on(s) the power to re	gularly appoint or elect a	a majority o	of the dire	ctors or truste	es of the s	upporting		
	_	organization You must o	•								
b	L	Type II. A supporting orga									
		control or management o	f the supporting org	anization vested in the s	ame perso	ons that co	ontrol or mana	ge the sup	ported		
	_	organization(s) You mus	•								
С	L	Type III functionally inte	•					ly integrate	ed with,		
		its supported organization		•	•	-	-				
d	L	Type III non-functionally						_	• •		
		that is not functionally int	-	• •	-		-	an attent	iveness		
		requirement (see instructi	•	•							
е	<u> </u>	Check this box if the orga					ı ıype ı, ıype	II, Type III			
	 -	functionally integrated, or	• •	nally integrated support	ing organiz	zation					
1 -		r the number of supported o	•	ad average action (a)					<u>-</u> -		
g		ide the following information Name of supported	(ii) EIN	(iii) Type of organization	(iv) is the orga	nization (isted ng document?	(v) Amount of	monetary	(vi) Amount of other		
	·	organization		(described on lines 1 10 above (see instructions))	Yes	No No	support (see in	structions)	support (see instructions)		
			-	above (see instructions))							
											
									_		
							_				
ota	1										

Part'II Support Schedule for Organizations Described in Sections 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)

(Complete only if you checked the box on line 5, 7, or 8 of Part I or if the organization failed to qualify under Part III If the organization fails to qualify under the tests listed below, please complete Part III)

Se	ction A. Public Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
1	Gifts, grants, contributions, and						
	membership fees received (Do not				!		
	ınclude any "unusual grants ")	1645176.	1774116.	2969019.	1854663.	<u>789</u> 113.	9032087.
2	Tax revenues levied for the organ-					-	
	ızatıon's benefit and either paid to						
	or expended on its behalf						
3	The value of services or facilities						
	furnished by a governmental unit to						
	the organization without charge						
4	Total. Add lines 1 through 3	1645176.	1774116.	2969019.	1854663.	789113.	9032087.
5	The portion of total contributions						
	by each person (other than a		_				
	governmental unit or publicly	}	·]				
	supported organization) included						
	on line 1 that exceeds 2% of the						
	amount shown on line 11,				:		
	column (f)			•		, -	4992342.
6	Public support. Subtract line 5 from line 4		_				4039745.
	ction B. Total Support						
Cale	ndar year (or fiscal year beginning in)	(a) 2013	(b) 2014	(c) 2015	(d) 2016	(e) 2017	(f) Total
7	Amounts from line 4	1645176.	1774116.	2969019.	1854663.	789113.	9032087.
8	Gross income from interest,						<u>-</u>
	dividends, payments received on						
	securities loans, rents, royalties,						
	and income from similar sources	1775.	1107.	909.	2108.	3415.	9314.
9	Net income from unrelated business						
	activities, whether or not the						
	business is regularly carried on						
10	Other income Do not include gain						
	or loss from the sale of capital						
	assets (Explain in Part VI)	42226.	66275.	9192 <u>3</u> .	82487.	61998.	344909.
11	Total support. Add lines 7 through 10						9386310.
	Gross receipts from related activities,	etc (see instruction	ons)			12	145619.
13	First five years. If the Form 990 is for	the organization's	first, second, third	d, fourth, or fifth ta	x year as a section	n 501(c)(3)	-
	organization, check this box and stop	here					▶□
Se	ction C. Computation of Publi	ic Support Per	rcentage				
14	Public support percentage for 2017 (I	ine 6, column (f) di	vided by line 11, c	olumn (f))		14	43.04 %
15	Public support percentage from 2016	Schedule A, Part	II, line 14			15	<u>45.18 %</u>
16a	33 1/3% support test - 2017. If the o	organization did no	t check the box or	line 13, and line	14 is 33 1/3% or m	nore, check this bo	x and
	stop here. The organization qualifies	as a publicly supp	orted organization				► [X]
b	33 1/3% support test - 2016. If the o	organization did no	t check a box on li	ne 13 or 16a, and	line 15 is 33 1/3%	or more, check th	ıs box
	and stop here. The organization quali	ifies as a publicly s	supported organiza	ation			▶
17a	10% -facts-and-circumstances test						
	and if the organization meets the "fac	ts-and-circumstani	ces" test, check th	is box and stop h	ere. Explain in Pai	t VI how the organ	ization
	meets the "facts-and-circumstances"	test The organiza	tion qualifies as a j	oublicly supported	lorganization		ightharpoons
b	10% -facts-and-circumstances test	t - 2016. If the orga	anization did not c	heck a box on line	e 13, 16a, 16b, or 1	7a, and line 15 is	10% or
	more, and if the organization meets th	ne "facts-and-circui	mstances" test, ch	eck this box and	stop here. Explain	in Part VI how the	
	organization meets the "facts-and-circ	cumstances" test	The organization q	ualifies as a public	cly supported orga	ınızatıon	▶ 🛄
18	Private foundation, If the organization	n did not check a	oox on line 13, 16a	a, 16b, 17a, o <u>r 1</u> 7b	, check this box a	nd see instructions	<u>.</u> ▶□
					0-1	dula A /Farm 000	~~ 000 EZ\ 0047

Part'III | Support Schedule for Organizations Described in Section 509(a)(2)

(Complete only if you checked the box on line 10 of Part I or if the organization failed to qualify under Part II If the organization fails to qualify under the tests listed below, please complete Part II) Section A. Public Support Calendar year (or fiscal year beginning in) (a) 2013 (b) 2014 (c) 2015 (d) 2016 (e) 2017 (f) Total 1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants") 2 Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose 3 Gross receipts from activities that are not an unrelated trade or busmess under section 513 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf The value of services or facilities furnished by a governmental unit to the organization without charge 6 Total. Add lines 1 through 5 7a Amounts included on lines 1, 2, and 3 received from disqualified persons b Amounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year c Add lines 7a and 7b 8 Public support. (Subtract line 7c from line 6) Section B. Total Support <u>(b) 20,14</u> Calendar year (or fiscal year beginning in) (a) 2013 (c) 2015(d) 2016 (e) 2017 (f) Total 9 Amounts from line 6 10a Gross income from interest. dividends, payments received on securities loans, rents, royalties, and income from similar sources b Unrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975 c Add lines 10a and 10b 11 Net income from unrelated business activities not included in line 10b. whether or not the business is regularly carried on Other income Do not include gain or loss from the sale of capital assets (Explain in Part VI) Total support (Add lines 9, 10c, 11, and 12) First five years. If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a section 501(c)(3) organization, check this box and stop here Section C. Computation of Public Support Percentage 15 Public support percentage for 2017 (line 8, column (f) divided by line 13, column (f)) % 15 16 Public support percentage from 2016 Schedule A, Part III, line 15 % Section D. Computation of Investment Income Percentage 17 Investment income percentage for 2017 (line 10c, column (f) divided by line 13, column (f)) 17 % 18 Investment income percentage from 2016 Schedule A, Part III, line 17 18 % 19a 33 1/3% support tests - 2017. If the organization did not check the box on line 14, and line 15 is more than 33 1/3%, and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization b 33 1/3% support tests - 2016. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3%, and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization 20 Private foundation. If the organization did not check a box on line 14, 19a, or 19b, check this box and see instructions

Part IV Supporting Organizations

(Complete only if you checked a box in line 12 on Part I If you checked 12a of Part I, complete Sections A and B If you checked 12b of Part I, complete Sections A and C If you checked 12c of Part I, complete Sections A, D, and E If you checked 12d of Part I, complete Sections A and D, and complete Part V)

Section	A. All	Supporting	Organizations

- 1 Are all of the organization's supported organizations listed by name in the organization's governing documents? If "No," describe in Part VI how the supported organizations are designated. If designated by class or purpose, describe the designation. If historic and continuing relationship, explain.
- 2 Did the organization have any supported organization that does not have an IRS determination of status under section 509(a)(1) or (2)? If "Yes," explain in Part VI how the organization determined that the supported organization was described in section 509(a)(1) or (2)
- 3a Did the organization have a supported organization described in section 501(c)(4), (5), or (6)? If "Yes," answer (b) and (c) below
- b Did the organization confirm that each supported organization qualified under section 501(c)(4), (5), or (6) and satisfied the public support tests under section 509(a)(2)? If "Yes," describe in Part VI when and how the organization made the determination
- c Did the organization ensure that all support to such organizations was used exclusively for section 170(c)(2)(B) purposes? If "Yes," explain in Part VI what controls the organization put in place to ensure such use
- 4a Was any supported organization not organized in the United States ("foreign supported organization")? If "Yes," and if you checked 12a or 12b in Part I, answer (b) and (c) below
- b Did the organization have ultimate control and discretion in deciding whether to make grants to the foreign supported organization? If "Yes," describe in Part VI how the organization had such control and discretion despite being controlled or supervised by or in connection with its supported organizations
- c Did the organization support any foreign supported organization that does not have an IRS determination under sections 501(c)(3) and 509(a)(1) or (2)? If "Yes," explain in Part VI what controls the organization used to ensure that all support to the foreign supported organization was used exclusively for section 170(c)(2)(B) purposes
- 5a Did the organization add, substitute, or remove any supported organizations during the tax year? If "Yes," answer (b) and (c) below (if applicable) Also, provide detail in Part VI, including (i) the names and EIN numbers of the supported organizations added, substituted, or removed, (ii) the reasons for each such action, (iii) the authority under the organization's organizing document authorizing such action, and (iv) how the action was accomplished (such as by amendment to the organizing document)
- b Type I or Type II only. Was any added or substituted supported organization part of a class already designated in the organization's organizing document?
- c Substitutions only. Was the substitution the result of an event beyond the organization's control?
- Did the organization provide support (whether in the form of grants or the provision of services or facilities) to anyone other than (i) its supported organizations, (ii) individuals that are part of the charitable class benefited by one or more of its supported organizations, or (iii) other supporting organizations that also support or benefit one or more of the filing organization's supported organizations? If "Yes," provide detail in Part VI.
- 7 Did the organization provide a grant, loan, compensation, or other similar payment to a substantial contributor (defined in section 4958(c)(3)(C)), a family member of a substantial contributor, or a 35% controlled entity with regard to a substantial contributor? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 8 Did the organization make a loan to a disqualified person (as defined in section 4958) not described in line 7? If "Yes," complete Part I of Schedule L (Form 990 or 990-EZ)
- 9a Was the organization controlled directly or indirectly at any time during the tax year by one or more disqualified persons as defined in section 4946 (other than foundation managers and organizations described in section 509(a)(1) or (2))? If "Yes," provide detail in Part VI.
- **b** Did one or more disqualified persons (as defined in line 9a) hold a controlling interest in any entity in which the supporting organization had an interest? If "Yes," provide detail in Part VI.
- c Did a disqualified person (as defined in line 9a) have an ownership interest in, or derive any personal benefit from, assets in which the supporting organization also had an interest? If "Yes," provide detail in Part VI.
- 10a Was the organization subject to the excess business holdings rules of section 4943 because of section 4943(f) (regarding certain Type II supporting organizations, and all Type III non-functionally integrated supporting organizations)? If "Yes," answer 10b below
 - **b** Did the organization have any excess business holdings in the tax year? (Use Schedule C, Form 4720, to determine whether the organization had excess business holdings)

ſ		Yes	No
-	1		
			,
L	2		ر
			4
ł	3a		
1		-	۔
-	3b		
	- 3c		-
			•
ŀ	4a		
			,
-	4b		
}	4c		
			;
			!
	 5a		-
		,	-
ŀ	5b 5c		
ļ	<u> </u>		
	6	`	
	7		
-			+
}	8		 ,
		-	
-	9a		
Ĺ	9b	'	
			:
-	9c		
-	10a		
	10b	-	
 1 99	00 or 99	0-EZ	2017

Check here if the current year is the organization's first as a non-functionally integrated Type III supporting organization (see

Schedule A (Form 990 or 990-EZ) 2017

4

3

4

5

Enter greater of line 2 or line 3

instructions)

Income tax imposed in prior year

Minimum asset amount for prior year (from Section B, line 8, Column A)

Distributable Amount. Subtract line 5 from line 4, unless subject to

emergency temporary reduction (see instructions)

<u>Sche</u>	dule A (Form 990 or 990-EZ) 2017 INSTITUTE FOR			76-0149778 Page 7
Pai	Type III Non-Functionally Integrated 509	(a)(3) Supporting Orga	anizations (continued)	
Sect	on D - Distributions			Current Year
1	Amounts paid to supported organizations to accomplish exe	mpt purposes		
2	Amounts paid to perform activity that directly furthers exemp	ot purposes of supported		
	organizations, in excess of income from activity			
3	Administrative expenses paid to accomplish exempt purpose	es of supported organization	ns	
4	Amounts paid to acquire exempt-use assets			<u></u>
5	Qualified set-aside amounts (prior IRS approval required)			
6	Other distributions (describe in Part VI) See instructions			
7	Total annual distributions. Add lines 1 through 6.			
8	Distributions to attentive supported organizations to which the	ne organization is responsive		
	(provide details in Part VI) See instructions	-		
9	Distributable amount for 2017 from Section C, line 6			
10	Line 8 amount divided by line 9 amount			
		(i)	(ii)	(iii)
Sect	on E - Distribution Allocations (see instructions)	Excess Distributions	Underdistributions	Distributable
	`		Pre-2017	Amount for 2017
1	Distributable amount for 2017 from Section C, line 6			
2	Underdistributions, if any, for years prior to 2017 (reason-			
	able cause required- explain in Part VI). See instructions			
3	Excess distributions carryover, if any, to 2017			
a	,			
	From 2013			
	From 2014	•		
	From 2015			
	From 2016			
	Total of lines 3a through e			
	Applied to underdistributions of prior years			
	Applied to 2017 distributable amount			
	Carryover from 2012 not applied (see instructions)			
i	Remainder Subtract lines 3g, 3h, and 3i from 3f			
4	Distributions for 2017 from Section D.	·		
•	line 7 \$			
а	Applied to underdistributions of prior years	·		
	Applied to 2017 distributable amount			
	Remainder Subtract lines 4a and 4b from 4	· - · · · · · · · · · · · · · · · · · ·		<u> </u>
5	Remaining underdistributions for years prior to 2017, if			
-	any Subtract lines 3g and 4a from line 2. For result greater		,	
	than zero, explain in Part VI. See instructions			
6	Remaining underdistributions for 2017 Subtract lines 3h			1
Ü	and 4b from line 1 For result greater than zero, explain in			
	Part VI See instructions			
7	Excess distributions carryover to 2018. Add lines 3j			
•	and 4c			
8				
	Excess from 2013			
	Excess from 2014			
	Excess from 2015			
	Excess from 2016			
	Excess from 2017			
	EVOGS HOLL FOLL			

Schedule A (Form 990 or 990-EZ) 2017

Part'VI	Supplemental Information Decode the evaluations required by Deat II line 10. Part II line 170 or 17h. Part III line 19.
	Supplemental Information. Provide the explanations required by Part II, line 10, Part II, line 17a or 17b, Part III, line 12, Part IV, Section A, lines 1, 2, 3b, 3c, 4b, 4c, 5a, 6, 9a, 9b, 9c, 11a, 11b, and 11c, Part IV, Section B, lines 1 and 2, Part IV, Section C, ine 1, Part IV, Section D, lines 2 and 3, Part IV, Section E, lines 1c, 2a, 2b, 3a, and 3b, Part V, line 1, Part V, Section B, line 1e, Part V, Section D, lines 5, 6, and 8, and Part V, Section E, lines 2, 5, and 6 Also complete this part for any additional information
	See instructions)
	
 	
	
	·
	——————————————————————————————————————

SCHEDULE C (Form 990 or 990-EZ)

Political Campaign and Lobbying Activities

For Organizations Exempt From Income Tax Under section 501(c) and section 527

➤ Complete if the organization is described below. ➤ Attach to Form 990 or Form 990-EZ.

➤ Go to www.irs.gov/Form990 for instructions and the latest information.

2017
Open to Public Inspection

Department of the Treasury Internal Revenue Service

If the organization answered "Yes," on Form 990, Part IV, line 3, or Form 990-EZ, Part V, line 46 (Political Campaign Activities), then

- Section 501(c)(3) organizations Complete Parts I-A and B Do not complete Part I-C
- Section 501(c) (other than section 501(c)(3)) organizations Complete Parts I-A and C below Do not complete Part I-B
- Section 527 organizations Complete Part I-A only

If the organization answered "Yes," on Form 990, Part IV, line 4, or Form 990-EZ, Part VI, line 47 (Lobbying Activities), then

- Section 501(c)(3) organizations that have filed Form 5768 (election under section 501(h)) Complete Part II-A Do not complete Part II-B
- Section 501(c)(3) organizations that have NOT filed Form 5768 (election under section 501(h)). Complete Part II-B. Do not complete Part II-A.

If the organization answered "Yes," on Form 990, Part IV, line 5 (Proxy Tax) (see separate instructions) or Form 990-EZ, Part V, line 35c (Proxy Tax) (see separate instructions), then

,,	,				
	501(c)(4), (5), or (6) organiza	tions Complete Part III			
Name of orga	anization			Em	ployer identification number
	INSTITU	TE FOR ENERGY R	ESEARCH		76-0149778
Part I-A	Complete if the org	ganization is exempt un	der section 501(c) or is a section 527	organization.
 -					
1 Provide	a description of the organiz	zation's direct and indirect polit	ical campaign activities	s in Part IV	
	campaign activity expendit	•	. 3		\$
	er hours for political campa			•	
	, - ,	3			
Part I-B	Complete if the org	ganization is exempt un	der section 501(c)(3).	.,
1 Enter th		incurred by the organization ur			\$
2 Enter th	e amount of any excise tax	incurred by organization mana-	gers under section 495		\$
3 If the or	ganization incurred a sectio	in 4955 tax, did it file Form 472	0 for this year?		Yes No
4a Was a c	correction made?				Yes No
b If "Yes,"	describe in Part IV				
Part I-C	Complete if the org	ganization is exempt un	der section 501(c), except section 501	(c)(3).
1 Enter th	e amount directly expended	d by the filing organization for s	ection 527 exempt fund	ction activities	\$
2 Enter th	e amount of the filing organ	ization's funds contributed to d	other organizations for	section 527	,
exempt	function activities			•	\$
3 Total ex	empt function expenditures	Add lines 1 and 2 Enter here	and on Form 1120-PO	L,	•
line 17b	•			•	
4 Did the	filing organization file Form	1120-POL for this year?			Yes No
5 Enter th	e names, addresses and er	mployer identification number (E	EIN) of all section 527 p	olitical organizations to whi	ich the filing organization
made p	ayments For each organiza	ition listed, enter the amount pa	aid from the filing organ	ization's funds. Also enter t	the amount of political
contribi	utions received that were pr	omptly and directly delivered to	a separate political or	ganization, such as a separ	ate segregated fund or a
political	action committee (PAC) If	additional space is needed, pro	ovide information in Par	t IV	
	(a) Name	(b) Address	(c) EiN	(d) Amount paid from	(e) Amount of political
				filing organization's	contributions received and
				funds If none, enter -0-	promptly and directly delivered to a separate
				1	political organization
			ļ		If none, enter ·0·
			1		

For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ.

Schedule C (Form 990 or 990-EZ) 2017

LHA

732041 11-09-17

Schedule C (Form 990 or 990-EZ) 2017	INSTITUTE	FOR ENERGY F	RESEARCH	76-0	149778 Page 2
Part II-A Complete if the org	ganization is	exempt under section	on 501(c)(3) and fil	ed Form 5768 (el	ection under
section 501(h)).					
		n affiliated group (and list i	n Part IV each affiliated	group member's nam	e, address, EIN,
expenses, and sha		· -			
B Check 🕨 💹 if the filing organiza	tion checked box	A and "limited control" pr	ovisions apply		
	its on Lobbying E ditures" means a	expenditures Imounts paid or incurred)	(a) Filing organization's totals	(b) Affiliated group totals
1a Total lobbying expenditures to infl	uence public opin	ion (grass roots lobbying)		0.	·
b Total lobbying expenditures to infl	uence a legislative	e body (direct lobbying)	ĺ	0.	
c Total lobbying expenditures (add I	ines 1a and 1b)		(0.	
d Other exempt purpose expenditur	es		ĺ	1402640.	
e Total exempt purpose expenditure	es (add lines 1c ar	nd 1d)		1402640.	
f Lobbying nontaxable amount. Ent	er the amount from	m the following table in bot	th columns	215264.	
If the amount on line 1e, column (a) of		e lobbying nontaxable am] [<u> </u>
Not over \$500,000		% of the amount on line 1e			'
Over \$500,000 but not over \$1,00	0,000 \$10	00,000 plus 15% of the exc	cess over \$500,000.		
Over \$1,000,000 but not over \$1,5		5,000 plus 10% of the exc	cess over \$1,000,000.		
Over \$1,500,000 but not over \$17		25,000 plus 5% of the exce			
Over \$17,000,000		000,000			
g Grassroots nontaxable amount (er	nter 25% of line 1	ŋ		53816.	
h Subtract line 1g from line 1a If zer	o or less, enter -0		ļ	0.	
i Subtract line 1f from line 1c If zero	o or less, enter -0-		1	0.	
j If there is an amount other than ze	ero on either line 1	h or line 1i, did the organiz	ation file Form 4720	_	
reporting section 4911 tax for this	year [?]		·	[Yes No
(Some organizations t	hat made a secti See the se	r Averaging Period Under on 501(h) election do not eparate instructions for li	have to complete all ones 2a through 2f.)	of the five columns b	elow.
	Lobbying E	xpenditures During 4-Ye	ar Averaging Period		
Calendar year (or fiscal year beginning in)	(a) 2014	(ь) 2015	(c) 2016	(d) 2017	(e) Total
2a Lobbying nontaxable amount	25054	258298.	227406.	215264.	951509.
b Lobbying ceiling amount	}		1		
(150% of line 2a, column(e))			<u>.</u>		1427264.
c Total lobbying expenditures					
d Grassroots nontaxable amount	6263	64575.	56852.	53816.	237878.
e Grassroots ceiling amount (150% of line 2d, column (e))					356817.
	1		1		

Schedule C (Form 990 or 990-EZ) 2017

f Grassroots lobbying expenditures

Schedule C (Form 990 or 990-EZ) 2017 INSTITUTE FOR ENERGY RESEARCH 76-0149778 Page 3 Part'll-B Complete if the organization is exempt under section 501(c)(3) and has NOT filed Form 5768 (election under section 501(h)).

	(a)	(t	o)
of the lobbying activity	Yes	No	Amo	ount
During the year, did the filing organization attempt to influence foreign, national, state or		-	-	
local legislation, including any attempt to influence public opinion on a legislative matter				
or referendum, through the use of				
a Volunteers?	,			
b Paid staff or management (include compensation in expenses reported on lines 1c through 1i)?				
c Media advertisements?				
d Mailings to members, legislators, or the public?				
e Publications, or published or broadcast statements?				
f Grants to other organizations for lobbying purposes?				
g Direct contact with legislators, their staffs, government officials, or a legislative body?				
h Rallies, demonstrations, seminars, conventions, speeches, lectures, or any similar means?				
Other activities?				
J Total Add lines 1c through 1i				
2a Did the activities in line 1 cause the organization to be not described in section 501(c)(3)?				
b If "Yes," enter the amount of any tax incurred under section 4912				
c If "Yes," enter the amount of any tax incurred by organization managers under section 4912				_
d If the filing organization incurred a section 4912 tax, did it file Form 4720 for this year?				
Part III-A Complete if the organization is exempt under section 501(c)(4), sec	tion 501(c	(5), or se	ction	
501(c)(6).				
			Yes	No
1 Were substantially all (90% or more) dues received nondeductible by members?		1		
2 Did the organization make only in-house lobbying expenditures of \$2,000 or less?		2		
3 Did the organization agree to carry over lobbying and political campaign activity expenditures from Part III-B Complete if the organization is exempt under section 501(c)(4), sec			otion_	
501(c)(6) and if either (a) BOTH Part III-A, lines 1 and 2, are answere				10 3 ic
answered "Yes."	iu 140, O	ii (b) Faii	, III-A, III	ie 0, 13
Dues, assessments and similar amounts from members		1		
 Section 162(e) nondeductible lobbying and political expenditures (do not include amounts of pol 	itical	\		
expenses for which the section 527(f) tax was paid).				
a Current year		2a		
b Carryover from last year		2b		
c Total		2c		
3 Aggregate amount reported in section 6033(e)(1)(A) notices of nondeductible section 162(e) dues		3		
4 If notices were sent and the amount on line 2c exceeds the amount on line 3, what portion of the	excess			
does the organization agree to carryover to the reasonable estimate of nondeductible lobbying and				
expenditure next year?		4		
5 Taxable amount of lobbying and political expenditures (see instructions)		5		
Part IV Supplemental Information				
Provide the descriptions required for Part I-A, line 1, Part I-B, line 4, Part I-C, line 5; Part II-A (affiliated gro	up list), Part I	I-A, lines 1 a	and 2 (see	
nstructions), and Part II-B, line 1. Also, complete this part for any additional information				
		_		
			-	
				- - -
				•

SCHEDULE D

Department of the Treasury Internal Revenue Service

Supplemental Financial Statements

► Complete if the organization answered "Yes" on Form 990,
Part IV, line 6, 7, 8, 9, 10, 11a, 11b, 11c, 11d, 11e, 11f, 12a, or 12b.

► Attach to Form 990.

► Go to www.irs.gov/Form990 for instructions and the latest information.

OMB No 1545-0047 Open to Public Inspection

Name of the organization

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

Pa	rt I Organizations Maintaining Donor Advise		s or Accounts. Complete if the
	organization answered "Yes" on Form 990, Part IV, lin	ie 6	
		(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year		
2	Aggregate value of contributions to (during year)		
3	Aggregate value of grants from (during year)		
4	Aggregate value at end of year		
5	Did the organization inform all donors and donor advisors in	writing that the assets held in donor advis	sed funds
	are the organization's property, subject to the organization's	exclusive legal control?	Yes No
6	Did the organization inform all grantees, donors, and donor a	dvisors in writing that grant funds can be	used only
	for charitable purposes and not for the benefit of the donor of	or donor advisor, or for any other purpose	conferring
	impermissible private benefit?		Yes No
Pa	rt II Conservation Easements. Complete if the org	ganization answered "Yes" on Form 990,	Part IV, line 7
1	Purpose(s) of conservation easements held by the organization	on (check all that apply)	
	Preservation of land for public use (e.g., recreation or e	education) Preservation of a hist	orically important land area
	Protection of natural habitat	Preservation of a cert	ified historic structure
	Preservation of open space		
2	Complete lines 2a through 2d if the organization held a qualif	fied conservation contribution in the form	of a conservation easement on the last
	day of the tax year		Held at the End of the Tax Year
а	Total number of conservation easements		2a
b	Total acreage restricted by conservation easements		2b
С	Number of conservation easements on a certified historic str	ucture included in (a)	
d	Number of conservation easements included in (c) acquired	after 7/25/06, and not on a historic structi	ure
	listed in the National Register		2d
3	Number of conservation easements modified, transferred, re-	leased, extinguished, or terminated by the	e organization during the tax
	year ▶		
4	Number of states where property subject to conservation ear		
5	Does the organization have a written policy regarding the per	• • • • • • • • • • • • • • • • • • • •	<u></u>
_	violations, and enforcement of the conservation easements i		└ Yes
6	Staff and volunteer hours devoted to monitoring, inspecting,	handling of violations, and enforcing con-	servation easements during the year
-		ding of welstiens, and onforcing consonie	tion cooppared display the same
7	Amount of expenses incurred in monitoring, inspecting, hand	ning of violations, and emorcing conserva	tion easements during the year
0	Does each conservation easement reported on line 2(d) above	ve entiefy the requirements of section 170	/b\/4\/B\/\\
8	and section 170(h)(4)(B)(ii)?	re satisfy the requirements of section 170	((1)(4)(D)(i) Yes No
9	In Part XIII, describe how the organization reports conservati	on eacements in its revenue and expense	
3	include, if applicable, the text of the footnote to the organization	•	
	conservation easements	non o manola otalomonto that goodhoo	the organization o decodining to
Pai	rt III Organizations Maintaining Collections o	f Art, Historical Treasures, or O	ther Similar Assets.
	Complete if the organization answered "Yes" on Form	•	
1a	If the organization elected, as permitted under SFAS 116 (AS	SC 958), not to report in its revenue stater	nent and balance sheet works of art,
	historical treasures, or other similar assets held for public ext	nibition, education, or research in furthera	nce of public service, provide, in Part XIII,
	the text of the footnote to its financial statements that descri	bes these items	
b	If the organization elected, as permitted under SFAS 116 (AS	SC 958), to report in its revenue statemen	t and balance sheet works of art, historical
	treasures, or other similar assets held for public exhibition, ed		
	relating to these items		
	(i) Revenue included on Form 990, Part VIII, line 1		▶ \$
	(ii) Assets included in Form 990, Part X		s
2	If the organization received or held works of art, historical tre	asures, or other similar assets for financia	
-	the following amounts required to be reported under SFAS 1		
a	Revenue included on Form 990, Part VIII, line 1		> \$
-	Assets included in Form 990, Part X	=	> \$
	For Paperwork Reduction Act Notice, see the Instructions	s for Form 990	Schedule D (Form 990) 2017

29

		re for ene								Page 2
Pai	t III Organizations Maintaining C									
3	Using the organization's acquisition, accession	on, and other record	ds, che	ck any of the	following that	t are a sig	ınıfıcant	use of its	collection	items
	(check all that apply)		_							
а	Public exhibition	C	:		hange progra					
b	Scholarly research	€	• 🗀	Other						
С	Preservation for future generations							_		
4	Provide a description of the organization's co							ose in Pari	t XIII	
5	During the year, did the organization solicit or					er sımılar	assets		٦.,	
Par	to be sold to raise funds rather than to be ma								Yes	No No
rai	t IV Escrow and Custodial Arrang reported an amount on Form 990, Par	- '	ete if th	e organizatio	n answered "	Yes" on I	-orm 990	J, Paπ IV,	line 9, or	
10			diant for	r contribution	on or other on	ooto not i	noludod			
ıa	Is the organization an agent, trustee, custodia on Form 990, Part X?	an or other intermed	ulary lu	Contribution	is or other as:	sets not i	riciuaea	Γ-	Yes	□ No
h	If "Yes," explain the arrangement in Part XIII a	and complete the fo	Mowing	table					」 res	NO
J	Tes, explain the arrangement in ratt Ama	and complete the ic	MOWING	table				-	Amount	
С	Beginning balance		_				1c	-	741104111	
d	Additions during the year						1d			
e	Distributions during the year						1e			
f	Ending balance						1f			
2a	Did the organization include an amount on Fo	orm 990, Part X, line	21, for	escrow or co	ustodial acco	unt liabilit			Yes	No
	If "Yes," explain the arrangement in Part XIII						_			
Par)			
		(a) Current year	(b)	Prior year	(c) Two year	s back (d) Three	ears back	(e) Four y	ears back
1a	Beginning of year balance				-					
b	Contributions									
С	Net investment earnings, gains, and losses				ļ					
d	Grants or scholarships	·								
е	Other expenditures for facilities]					
	and programs				7					
f	Administrative expenses				ļ					
g	End of year balance		ļ	<u>. </u>						
2	Provide the estimated percentage of the curre	ent year end baland		1g, column (a	a)) held as					
а	Board designated or quasi-endowment		_%							
ь	Permanent endowment	%								
С	Temporarily restricted endowment	%								
_	The percentages on lines 2a, 2b, and 2c should be a sh		_4 41-							
За	Are there endowment funds not in the posses	ssion of the organiz	ation tr	iat are neio a	ina aaministe	rea for th	e organi	zation	Г	/aa N-
	by									es No
	(i) unrelated organizations (ii) related organizations								3a(i)	
h	If "Yes" on line 3a(ii), are the related organizations	tione lieted as requi	red on	Schedule R2					3a(ıi) 3b	
4	Describe in Part XIII the intended uses of the								ر من	
	rt VI Land, Buildings, and Equipm		OWITIONII.	. 101105						
	Complete if the organization answered		0. Part I	IV. line 11a S	See Form 990	. Part X. I	ne 10			
	Description of property	(a) Cost or o			or other		cumulate	ed	(d) Book	value
	Josephan C. P. Sport,	basis (investi		, , ,	(other)		reciation	1	(,	
1a	Land	<u> </u>				 ·		<u> </u>		
b	Buildings		-							
c	Leasehold improvements			4	04807.		3720	17.	3	2790.
d	Equipment				30803.		1451			5673.
	Other				58374.		448			3498.
	, Add lines 1a through 1e (Column (d) must ed	gual Form 990, Part	X, colu	mn (B), line 1	10c)			▶		1961.

Schedule D (Form 990) 2017

Complete if the organization answered "Yes"			
(a) Description of security or category (including name of security)	(b) Book value	(c) Method of value	ation Cost or end-of-year market value
1) Financial derivatives			
2) Closely-held equity interests			
3) Other	<u> </u>		
(A) ·			
(B)			
(C)			
(D)			
(E)	<u> </u>		
(F)			
(G)			
(H)			
otal (Col (b) must equal Form 990, Part X, col. (B) line 12.)	<u> </u>		
Part VIII Investments - Program Related.			
Complete if the organization answered "Yes"			
(a) Description of investment	(b) Book value	(c) Method of value	ation. Cost or end-of-year market value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal (Col. (b) must equal Form 990, Part X, col. (B) line 13.)			
Part IX Other Assets.			
Complete if the organization answered "Yes"	on Form 990, Part IV,	line 11d See Form 990, Par	t X, line 15
(a)	Description		(b) Book value
(1)			
(2)			
(3)			
(4)			
(5)			
(6)			
(7)			
(8)			
(9)			
otal. (Column (b) must equal Form 990, Part X, col. (B) lin	e 15)		.
Part X Other Liabilities.	<u> </u>	· · · · · · · · · · · · · · · · · · ·	
Complete if the organization answered "Yes"	on Form 990 Part IV	line 11e or 11f See Form 99	90. Part X. line 25
. (a) Description of liability	2 2 230, 1 4 (4)	(b) Book value	
(1) Federal income taxes		, . ,	
		18041.	
(2) CAPITAL LEASE OBLIGATION (3) DEFERRED RENT AND LEASE I	MCENIMITOR	10041.	
	INCERTIA	74786.	
(4) LIABILITY		/ 1/00 •	
(5)			
(6)			
(7)			
	l I		
(8)			
(8) (9) Total. (Column (b) must equal Form 990, Part X, col. (B) lin		92827.	

organization's liability for uncertain tax positions under FIN 48 (ASC 740) Check here if the text of the footnote has been provided in Part XIII X Schedule D (Form 990) 2017

732053 10-09-17

Part XI Reconciliation of Revenue per Audited Financial Sta		
		nue per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, lin	ne 12a	
1 Total revenue, gains, and other support per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part VIII, line 12 a Net unrealized gains (losses) on investments	2a	
a Net unrealized gains (losses) on investments b Donated services and use of facilities	2b	
c Recoveries of prior year grants	2c	
d Other (Describe in Part XIII)	2d	
e Add lines 2a through 2d		
3 Subtract line 2e from line 1		3
4 Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a Investment expenses not included on Form 990, Part VIII, line 7b	_4a	
b Other (Describe in Part XIII)	4b_	
c Add lines 4a and 4b		4c
5 Total revenue Add lines 3 and 4c. (This must equal Form 990, Part I, line 12)		5
Part XII Reconciliation of Expenses per Audited Financial St	•	nses per Return.
Complete if the organization answered "Yes" on Form 990, Part IV, lin	e 12a	
1 Total expenses and losses per audited financial statements		1
2 Amounts included on line 1 but not on Form 990, Part IX, line 25	ا م ا	
a Donated services and use of facilities	2a	
b Prior year adjustments	2b	-
c Other losses	2c 2d	
d Other (Describe in Part XIII) e Add lines 2a through 2d	_2 <u>u</u>	20
3 Subtract line 2e from line 1		2e 3
4 Amounts included on Form 990, Part IX, line 25, but not on line 1		<u> </u>
a Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b Other (Describe in Part XIII)	4b	
c Add lines 4a and 4b		4c
5 Total expenses Add lines 3 and 4c. (This must equal Form 990, Part I, line 18	3)	5
PART X, LINE 2:		
INCOME TAXES		
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND	NET UNRELATE	D BUSINESS INCOME.
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND	NET UNRELATE	D BUSINESS INCOME. D NO NET UNRELATED
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND BUSINESS INCOME AND ACCORDINGLY, NO PROVI	NET UNRELATE 2016, IER HA	D BUSINESS INCOME. D NO NET UNRELATED ME TAXES WAS
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND BUSINESS INCOME AND ACCORDINGLY, NO PROVI REQUIRED. THE ALLIANCE IS EXEMPT FROM IN	NET UNRELATE 2016, IER HA SION FOR INCO COME TAX ON I	D BUSINESS INCOME. D NO NET UNRELATED ME TAXES WAS NCOME OTHER THAN N
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND BUSINESS INCOME AND ACCORDINGLY, NO PROVI REQUIRED. THE ALLIANCE IS EXEMPT FROM IN UNRELATED BUSINESS INCOME UNDER SECTION 5 CODE. FOR THE YEARS ENDED DECEMBER 31, 20	NET UNRELATE 2016, IER HA SION FOR INCO COME TAX ON I 01(C)(4) OF T 17 AND 2016,	D BUSINESS INCOME. D NO NET UNRELATED ME TAXES WAS NCOME OTHER THAN N HE INTERNAL REVENUE THE ALLIANCE HAD N
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND BUSINESS INCOME AND ACCORDINGLY, NO PROVI REQUIRED. THE ALLIANCE IS EXEMPT FROM IN UNRELATED BUSINESS INCOME UNDER SECTION 5 CODE. FOR THE YEARS ENDED DECEMBER 31, 20 NET UNRELATED BUSINESS INCOME AND ACCORDI	NET UNRELATE 2016, IER HA SION FOR INCO COME TAX ON I 01(C)(4) OF T 17 AND 2016,	D BUSINESS INCOME. D NO NET UNRELATED ME TAXES WAS NCOME OTHER THAN N HE INTERNAL REVENU THE ALLIANCE HAD N
UNDER SECTION 501(C)(3) OF THE INTERNAL R THE PAYMENT OF TAXES ON INCOME OTHER THAN FOR THE YEARS ENDED DECEMBER 31, 2017 AND BUSINESS INCOME AND ACCORDINGLY, NO PROVI	NET UNRELATE 2016, IER HA SION FOR INCO COME TAX ON I 01(C)(4) OF T 17 AND 2016,	D BUSINESS INCOME. D NO NET UNRELATED ME TAXES WAS NCOME OTHER THAN N HE INTERNAL REVENU THE ALLIANCE HAD N

Schedule D (Form 990) 2017

SCHEDULE J (Form 990)

Compensation Information

For certain Officers, Directors, Trustees, Key Employees, and Highest **Compensated Employees**

➤ Complete if the organization answered "Yes" on Form 990, Part IV, line 23. Attach to Form 990.

Schedule J (Form 990) 2017

Inspection

OMB No 1545-0047

Department of the Treasury Internal Revenue Service Name of the organization

► Go to www.irs.gov/Form990 for instructions and the latest information.

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

Pa	art I Questions Regarding Compensation			
			Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed on Form 990,		1	1
	Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items			
	First-class or charter travel Housing allowance or residence for personal use			
	Travel for companions Payments for business use of personal residence	İ	Ì	
	Tax indemnification and gross-up payments Health or social club dues or initiation fees			
	Discretionary spending account Personal services (such as, maid, chauffeur, chef)			
		1		
b	If any of the boxes on line 1a are checked, did the organization follow a written policy regarding payment or			١.
	reimbursement or provision of all of the expenses described above? If "No," complete Part III to explain	1b		
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all directors,	_	i	
	trustees, and officers, including the CEO/Executive Director, regarding the items checked on line 1a?	2	ļ <u>.</u>	ļ
3	Indicate which, if any, of the following the filing organization used to establish the compensation of the organization's			
	CEO/Executive Director Check all that apply Do not check any boxes for methods used by a related organization to	ľ	İ	ľ
	establish compensation of the CEO/Executive Director, but explain in Part III		ļ	
	Compensation committee Written employment contract			
	Independent compensation consultant Compensation survey or study			İ
	X Form 990 of other organizations			
	Duman the year did any necessitated as Ferre 2000 Part VIII. Contract A live to with respect to the files.	1	İ	!
4	During the year, did any person listed on Form 990, Part VII, Section A, line 1a, with respect to the filing			
_	organization or a related organization Receive a severance payment or change-of-control payment?			- V
		4a		X
b	Participate in, or receive payment from, an equity-based compensation arrangement?	4b		X
C	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III	4c		<u> </u>
	Tes to any or lines 4a-o, list the persons and provide the applicable amounts for each term in Fart in			
	Only section 501(c)(3), 501(c)(4), and 501(c)(29) organizations must complete lines 5-9.			
5	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the revenues of]		
а	The organization?	5a		X
b	Any related organization?	5b		X
	If "Yes" on line 5a or 5b, describe in Part III			
6	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation			
	contingent on the net earnings of			١.
а	The organization?	6a		X
b	Any related organization?	6b		X
	If "Yes" on line 6a or 6b, describe in Part III			
7	For persons listed on Form 990, Part VII, Section A, line 1a, did the organization provide any nonfixed payments	١	_	
	not described on lines 5 and 6? If "Yes," describe in Part III	7	x	
8	Were any amounts reported on Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the			
	initial contract exception described in Regulations section 53 4958-4(a)(3)? If "Yes," describe in Part III	8		x
9	If "Yes" on line 8, did the organization also follow the rebuttable presumption procedure described in			
	Pagulations section 53 4959.6(c)?	۰	i	

732111 10-17-17

LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule J (Form 990) 2017

Part II Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use duplicate copies if additional space is needed

For each individual whose compensation must be reported on Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions, on row (ii) Do not list any individuals that aren't listed on Form 990, Part VII

Note: The sum of columns (B)(i)-(iii) for each listed individual must equal the total amount of Form 990, Part VII, Section A, line 1a, applicable column (D) and (E) amounts for that individual

	(B) Breakdown of	W-2 and/or 1099-MI	SC compensation	(C) Retirement and other deferred	(D) Nontaxable benefits	(E) Total of columns	(F) Compensation in column (B)	
(A) Name and Title		(i) Base compensation	(ii) Bonus & incentive compensation	(III) Other reportable compensation	compensation	benefits	(B)(i)-(D)	reported as deferred on prior Form 990
(1) THOMAS PYLE	(ı)	78507.	24600.	2181.	3362.	4871.		0.
PRESIDENT	(0)	160843.	50400.	4469.	6888.	9980.		0.
(2) LISA WALLACE	(i)	70808.	24750.	2992.	3075.	5349.	106974.	0.
SEC/TREASURER/SVP DEVELOP.	(ii)	86543.	30250.	3657.	3758.	6538.	130746.	0.
	(1)							
	(ii)							
	(1)							
	(ii)						Ī	
	(i)							
	(ii)							
	(i)							
	(iı)		<u></u>					
	(i)			· · · · · · · · · · · · · · · · · · ·				
	(ii)							·
	(i)							· · -
	(ii)	-	-					
	(i)							
	(ii)							
	(1)							
	(ii)							
	(i)							
	(ii)					-		
	(i)							
	_ (ii)_							
	(i)	-					_	
	(ii)		-				_	
	(i)	-						
	(i)							
	(i)			-				
	(ii)					·		
	(i)		= ==				-	
1	(i)			·				†

Part III Supplemental Information -
Provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 3, 4a, 4b, 4c, 5a, 5b, 6a, 6b, 7, and 8, and for Part II Also complete this part for any additional information
PART I, LINE 7:
THE INSTITUTE FOR ENERGY RESEARCH (IER) AWARDED DISCRETIONARY PERFORMANCE
BASED INCENTIVE BONUSES TO THE INDIVIDUALS LISTED IN PART VII OF FORM 990
AND SCHEDULE J, WHICH IN THE AGGREGATE TOTALLED \$140,000. THESE BONUSES
WERE ALLOCATED PROPORTIONATELY BETWEEN IER AND THE AMERICAN ENERGY
ALLIANCE, A RELATED 501(C)(4) WITH WHOM IER SHARES EMPLOYEES UNDER A COMMON
PAYMASTER ARRANGEMENT, BASED ON SALARY ALLOCATED TO EACH ORGANIZATION
DURING THE CALENDAR YEAR.
•
-

SCHEDULE M (Form 990)

Noncash Contributions

OMB No 1545-0047

Open To Public Inspection

Department of the Treasury Internal Revenue Service

Name of the organization

► Complete if the organizations answered "Yes" on Form 990, Part IV, lines 29 or 30.

Attach to Form 990.

Go to www.irs.gov/Form990 for the latest information.

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

Pai	rt I Types of Property						
		(a) Check if applicable	(b) Number of contributions or items contributed	(c) Noncash contribution amounts reported on Form 990, Part VIII, line 1g	Method of noncash contr	(d) determining ibution amoi	
1	Art - Works of art				· · · · · ·		
2	Art - Historical treasures				·		
3	Art - Fractional interests						
4	Books and publications						
5	Clothing and household goods						
6	Cars and other vehicles						
7	Boats and planes					_	
8	Intellectual property						
9	Securities - Publicly traded	X	1	152723.	PUBLISHED	FAIR V	ALUE
10	Securities - Closely held stock						
11	Securities Partnership, LLC, or				_		
	trust interests		_				
12	Securities · Miscellaneous						
13	Qualified conservation contribution -						
	Historic structures						
14	Qualified conservation contribution - Other						
15	Real estate - Residential						
16	Real estate - Commercial						
17	Real estate - Other						
18	Collectibles						
19	Food inventory						
20	Drugs and medical supplies						
21	Taxidermy						
22	Historical artifacts						
23	Scientific specimens				_		
24	Archeological artifacts				_		
25	Other • ()						
26	Other ()						
27	Other • ()				_		
28	Other ▶ ()				_		
29	Number of Forms 8283 received by the organiz	zation durin	g the tax year for o	contributions			
	for which the organization completed Form 828	33, Part IV,	Donee Acknowled	gement 29			
						Ye	s No
30a	During the year, did the organization receive by	contribution	on any property rep	ported in Part I, lines 1 throu	gh 28, that it		i
	must hold for at least three years from the date	of the initia	al contribution, and	d which isn't required to be ι	used for	·	
	exempt purposes for the entire holding period?)				30a	<u> </u>
b	If "Yes," describe the arrangement in Part II						- -
31	Does the organization have a gift acceptance p	oolicy that re	equires the review	of any nonstandard contribi	utions?	31	<u> </u>
32a	Does the organization hire or use third parties	or related or	ganizations to soli	cit, process, or sell noncash			
	contributions?					32a	<u> </u>
b	If "Yes," describe in Part II						
33	If the organization didn't report an amount in c	olumn (c) fo	r a type of propert	y for which column (a) is che	ecked,		
	describe in Part II			····			
LHA	For Paperwork Reduction Act Notice, see	the Instruc	tions for Form 99	0.	Schedule	e M (Form 9	90) 2017

732141 09-07-17

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Schedule M	(Form 990) 2017	INSTITUTE	<u>FOR</u>	ENERGY	RESEARCH		<u>76-0149778</u>	Page 2
Part II	Supplemental is reporting in Part	Information. Pr I, column (b), the nu dditional information	ovide th	e information f contributions	required by Part I, s, the number of ite	lines 30b, 32b, and 33 ems received, or a com	, and whether the organiza bination of both Also com	ation iplete
			<u> </u>					
				-				
			-					
				·				
			_					
							· · · · · · · · · · · · · · · · · · ·	
		·	_					
·	·							
						-		
		<u></u> .	···				<u> </u>	
						<u>. </u>		
				<u></u>				
				<u> </u>				· .
732142 09-07-1	17						Schedule M (Form	990) 2017

SCHEDULE O

(Form 990 or 990-EZ)

Department of the Treasury Internal Revenue Service

Supplemental Information to Form 990 or 990-EZ

Complete to provide information for responses to specific questions on Form 990 or 990-EZ or to provide any additional information.

Attach to Form 990 or 990-EZ.

Go to www.irs.gov/Form990 for the latest information.

OMB No 1545-0047 Open to Public

Inspection

Name of the organization

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

FORM 990, PART I, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
THE INSTITUTE FOR ENERGY RESEARCH (IER) IS A NOT-FOR-PROFIT
ORGANIZATION THAT CONDUCTS INTENSIVE RESEARCH AND ANALYSIS ON THE
FUNCTIONS, OPERATIONS, AND GOVERNMENT REGULATION OF GLOBAL ENERGY
MARKETS. IER MAINTAINS THAT FREELY-FUNCTIONING ENERGY MARKETS PROVIDE
THE MOST EFFICIENT AND EFFECTIVE SOLUTIONS TO TODAY'S GLOBAL ENERGY AND
ENVIRONMENTAL CHALLENGES AND, AS SUCH, ARE CRITICAL TO THE WELL-BEING
OF INDIVIDUALS AND SOCIETY.
FORM 990, PART III, LINE 1, DESCRIPTION OF ORGANIZATION MISSION:
FUNCTIONS, OPERATIONS, AND GOVERNMENT REGULATION OF GLOBAL ENERGY
MARKETS. IER MAINTAINS THAT FREELY-FUNCTIONING ENERGY MARKETS PROVIDE
THE MOST EFFICIENT AND EFFECTIVE SOLUTIONS TO TODAY'S GLOBAL ENERGY AND
ENVIRONMENTAL CHALLENGES AND, AS SUCH, ARE CRITICAL TO THE WELL-BEING
OF INDIVIDUALS AND SOCIETY.
FORM 990, PART VI, SECTION B, LINE 11B:
THE FORM 990 WAS PREPARED BY AN OUTSIDE CPA FIRM AND REVIEWED AND APPROVED
BY MANAGEMENT FOR ACCURACY. THE FORM 990 WAS PROVIDED TO THE BOARD OF
DIRECTORS OF IER PRIOR TO FILING. THE FORM 990 WAS REVIEWED AND SIGNED BY
THE PRESIDENT FOR FILING BY THE DEADLINE.
FORM 990, PART VI, SECTION B, LINE 12C:
AS A GENERAL RULE, THE ORGANIZATION DOES NOT ENTER INTO BUSINESS
TRANSACTIONS WITH MEMBERS OF THE BOARD OF DIRECTORS AND REVIEWS ALL
TRANSACTIONS FOR POTENTIAL CONFLICTS OF INTEREST. IF MANAGEMENT OR THE LHA For Paperwork Reduction Act Notice, see the Instructions for Form 990 or 990-EZ. Schedule O (Form 990 or 990-EZ) (2017)

732211 09-07-17

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

BOARD OF DIRECTORS BELIEVES A CONFLICT OF INTEREST EXISTS, THE CONFLICT OF
INTEREST POLICY PROVIDES FOR SPECIFIC PROCEDURES TO ADDRESS THE CONFLICT.
INDIVIDUALS COVERED UNDER THIS POLICY INCLUDE OFFICERS, DIRECTORS AND A
MEMBER OF A COMMITTEE WITH BOARD DELEGATED POWERS. CONFLICTS WHICH MUST BE
REPORTED INCLUDE TRANSACTIONS WITH THESE INDIVIDUALS, MEMBERS OF THEIR
FAMILY, ENTITIES IN WHICH THEY HAVE AN INVESTMENT IN OR RECEIVE
COMPENSATION FROM, AND ANY RELATIONSHIPS IN WHICH THE BOARD OF DIRECTORS,
IN ITS SOLE DISCRETION, BELIEVES MAY OR DOES CREATE A CONFLICT OF INTEREST.
THE POLICY SETS FORTH A REQUIREMENT TO DISCLOSE THESE CONFLICTS. THE
GOVERNING BOARD MAKES ALL DECISIONS REGARDING THE DETERMINATION THAT A
CONFLICT IN FACT EXISTS AND IN THE DETERMINATION OF THE APPROPRIATE COURSE
OF ACTION TO RESOLVE THE CONFLICT. THE PARTY WITH THE POTENTIAL CONFLICT
MAY PRESENT HIS OR HER CASE TO THE BOARD OF DIRECTORS, BUT MAY NOT BE
INVOLVED IN THE DELIBERATION AND FINAL VOTE OR ACTION OF THE BOARD OF
DIRECTORS.

EMPLOYEES ARE ALSO SUBJECT TO A CONFLICT OF INTEREST POLICY CONTAINED IN

THE EMPLOYEE MANUAL. SIMILAR TO THE PROCESS DESCRIBED ABOVE, THE GOVERNING
BOARD AND/OR PRESIDENT MAKE ALL DECISIONS REGARDING THE DETERMINATION THAT
A CONFLICT IN FACT EXISTS AND THE BOARD OF DIRECTORS DETERMINES THE

APPROPRIATE COURSE OF ACTION TO RESOLVE THE CONFLICT. THE PARTY WITH THE

POTENTIAL CONFLICT MAY PRESENT HIS OR HER CASE TO THE PRESIDENT AND/OR

BOARD OF DIRECTORS, BUT MAY NOT BE INVOLVED IN THE DELIBERATION AND FINAL

VOTE OR ACTION OF THE BOARD OF DIRECTORS.

FORM 990, PART VI, SECTION B, LINE 15:

THE PROCESS USED BY IER TO DETERMINE THE COMPENSATION OF THE CEO IS BASED

UPON COMPARABLE SALARIES FOR EXECUTIVES WITH SIMILAR EXPERIENCE AND

732212 09-07-17

Schedule O (Form 990 or 990-EZ) (2017)

INSTITUTE FOR ENERGY RESEARCH

Employer identification number 76-0149778

RESPONSIBILITIES IN THE NONPROFIT SECTOR AND IS APPROVED BY THE EXECUTIVE

COMMITTEE OF THE BOARD OF DIRECTORS. THE EXECUTIVE COMMITTEE REPORTS TO

THE BOARD, AT THE NEXT BOARD MEETING, ALL OF ITS ACTIONS SINCE THE LAST

BOARD MEETING. DELIBERATION AND APPROVAL OF THE SALARY IS MADE DURING AN

EXECUTIVE SESSION AND INSTRUCTIONS AS TO THE SALARY LEVEL OF THE PRESIDENT

ARE MADE IN WRITING BY A MEMBER OF THE EXECUTIVE COMMITTEE TO MANAGEMENT.

SALARIES FOR TOP MANAGEMENT ARE ALSO BASED ON COMPARABLE SALARIES OF SENIOR

LEVEL MANAGERS IN THE NONPROFIT SECTOR USING FORM 990'S FROM COMPARABLE

ORGANIZATIONS AS WELL AS PUBLISHED SALARY SURVEYS. THE RECOMMENDED

SALARIES ARE PROPOSED TO THE EXECUTIVE COMMITTEE OF THE BOARD OF DIRECTORS

FOR THIER APPROVAL.

COPIES OF THE SALARY INFORMATION USED IN DETERMINING THE SALARY LEVELS

ABOVE AND DOCUMENTS NOTING THE APPROVED SALARIES ARE MAINTAINED AT THE

CORPORATE HEADQUARTERS OF IER.

FORM 990, PART VI, LINE 17, LIST OF STATES RECEIVING COPY OF FORM 990:

AL,AK,AR,CO,CT,FL,GA,HI,IL,KS,KY,ME,MD,MA,MI,MN,MS,NH,NJ,NM,NC,ND,OH,OK,OR

PA,RI,SC,TN,UT,VA,WA,WV,WI,NV,DC

FORM 990, PART VI, SECTION C, LINE 19:

THE ORGANIZATION, UPON REQUEST, MAKES AVAILABLE TO THE PUBLIC ITS FORM 990

AND ALL OTHER DOCUMENTS REQUIRED BY LAW. FINANCIAL STATEMENTS AND ANY

POLICY DOCUMENTS ARE PROVIDED TO INTERESTED PARTIES, SUCH AS FUNDERS, UPON

REQUEST. THE BOARD RESERVES THE RIGHT TO EVALUATE THE NECESSITY OF EACH

SUCH REQUEST FOR FINANCIAL STATEMENTS AND POLICY DOCUMENTS AND TO

DETERMINE, IN ITS SOLE DISCRETION, WHETHER TO RELEASE THESE DOCUMENTS TO AN 732212 09-07-17 Schedule O (Form 990 or 990-EZ) (2017)

PROGRAM SERVICE EXPENSES	0.
WANAGEMENT AND GENEDAL EXDENCES	
MANAGEMENT AND GENERAL EXPENSES	υ.

FUNDRAISING EXPENSES	7500.
FUNDIALIDING BALBABE	<u></u>

TOTAL EXPENSES 7500.

TOTAL OTHER FEES ON FORM 990, PART IX, LINE 11G, COL A

Schedule O (Form 990 or 990-EZ) (2017)

334387.

Schedule O (Form 990 or 990-EZ) (2017)	Page 2
Name of the organization INSTITUTE FOR ENERGY RESEARCH	Employer identification number 76-0149778
FORM 990, PART XII, LINE 2C	
NO CHANGE FROM THE PRIOR YEAR.	
· · · · · · · · · · · · · · · · · · ·	
,	
	<u> </u>

SCHEDULE R (Form 990)

Department of the Treasury Internal Revenue Service

Related Organizations and Unrelated Partnerships

Complete if the organization answered "Yes" on Form 990, Part IV, line 33, 34, 35b, 36, or 37.

► Attach to Form 990.

Go to www.irs.gov/Form990 for instructions and the latest information.

Open to Publi

Open to Public Inspection

OMB No 1545-0047

Employer identification number Name of the organization 76-0149778 INSTITUTE FOR ENERGY RESEARCH Identification of Disregarded Entities, Complete if the organization answered "Yes" on Form 990, Part IV. line 33 Part I (c) (d) (e) (f) Name, address, and EIN (if applicable) Legal domicile (state or Total income End-of-year assets Direct controlling Primary activity of disregarded entity entity foreign country) Identification of Related Tax-Exempt Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related tax-exempt Part II organizations during the tax year (a) (b) (d) (e) (c) (f) (g) Section 512(b)(13) Name, address, and EIN Legal domicile (state or Exempt Code Public charity Direct controlling Primary activity controlled status (if section of related organization section entity foreign country) entity? 501(c)(3)) No Yes AMERICAN ENERGY ALLIANCE - 26-2731617 1155 15TH STREET, NW SUITE 900 X WASHINGTON DC 20005 EDUCATIONAL ADVOCACY DISTRICT OF COLUMBIA 501(C)(4) NA

For Paperwork Reduction Act Notice, see the Instructions for Form 990.

Part III Identification of Related Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a partnership during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512-514)	(f) Share of total income	(g) Share of end-of-year	Disprop	ortionate tions?	(i) Code V-UBI amount in box 20 of Schedule	(j) General or managing partner?	(k) Percentage ownership									
		foreign country)		sections 512-514)		assets	Yes No		K-1 (Form 1065)	Yes No										
							!													
				!																
	<u> </u>										 									
	E.																			
			<u> </u>					<u></u>												

Part IV ldentification of Related Organizations Taxable as a Corporation or Trust. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, because it had one or more related organizations treated as a corporation or trust during the tax year

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership	ent	tion b(13) rolled ity?

Transactions With Related Organizations. Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35b, or 36

Not	e: Complete line 1 if any entity is listed in Parts II, III, or IV of this schedule		Yes	No
1	During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?			
а	Receipt of (i) interest, (ii) annuities, (iii) royalties, or (iv) rent from a controlled entity	1a		X
b	Gift, grant, or capital contribution to related organization(s)	1b		X
С	Gift, grant, or capital contribution from related organization(s)	1c		X
d	Loans or loan guarantees to or for related organization(s)	1d		X
е	Loans or loan guarantees by related organization(s)	1e_	Х	
f	Dividends from related organization(s)	1f		х
g	Sale of assets to related organization(s)	1g		_X_
h	Purchase of assets from related organization(s)	1h		X
i	Exchange of assets with related organization(s)	11		X
j	Lease of facilities, equipment, or other assets to related organization(s)	_1 <u>i</u>		X
k	Lease of facilities, equipment, or other assets from related organization(s)	1k		х
ī	Performance of services or membership or fundraising solicitations for related organization(s)	11		Х
m	Performance of services or membership or fundraising solicitations by related organization(s)	1m		Х
	Sharing of facilities, equipment, mailing lists, or other assets with related organization(s)	1n	Х	
0	Sharing of paid employees with related organization(s)	10	Х	
	· ·			
р	Reimbursement paid to related organization(s) for expenses	1p		X
q	Reimbursement paid by related organization(s) for expenses	1q	Х	
r	Other transfer of cash or property to related organization(s)	1r		x
	Other transfer of cash or property from related organization(s) Other transfer of cash or property from related organization(s)	1s	\dashv	X
2	If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds	13_	1	
	The second to say of the second to the secon			

(a) Name of related organization	(b) Transaction type (a·s)	(c) Amount involved	(d) Method of determining amount involved
(1) AMERICAN ENERGY ALLIANCE	N	222242.	ACTUAL COST
(2) AMERICAN ENERGY ALLIANCE	0	539622.	ACTUAL COST
(3) AMERICAN ENERGY ALLIANCE	<u> </u>	725820.	ACTUAL COST
(4)			
(5)		_	
(6)			

Part VI ' Unrelated Organizations Taxable as a Partnership. Complete if the organization answered "Yes" on Form 990, Part IV, line 37

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships

(a)	(b)	(c)	(d)	(e) Are a) III	(f) Share of	(g) Share of		h)	(i)	(j))	(k)
Name, address, and EIN of entity	Primary activity	Legal domicile (state or foreign country)		Are a partners 501(c) orgs		Share of total income	end-of-year assets	alloca Yes	nate tions?	of Schedule K-1	mana partn Yes	al or F ging er?	ownership
												ł	
		 			_	•						4	
	-								١				
· ————————————————————————————————————			`	$\mid \cdot \mid$	_			-	1		-	_	
							-	١.					
]							را					
				+							H	+	
										}	} }		,
											.		
-							· · · · · · · · · · · · · · · · · · ·	_				\dashv	
	<u>.</u>												
	-					:							
								<u> </u>					
	1												
	-									`			

Schedule R	(Form 990) 2017 Supplementa	INSTITUTE	FOR ENER	GY RESEARCH	76-	0149778 Page 5
Part VII	Supplementa	Information.				
		information for responses to	questions on Sc	chedule R See instructi	ons	
14		<u> </u>				
,,						
		- · · · · · · · · · · · · · · · · · · ·				
					`	
						
						_
			·			=
		·				
				·		=
					 .	
	····					
****	·					
						
						-
					····	
						- -
-	<u> </u>					
						
	_	-				